

# **QUARTERLY STATEMENT**

AS OF MARCH 31, 2016
OF THE CONDITION AND AFFAIRS OF THE

Fidelis SecureCare of Michigan Inc.

Dental Service Corporation [ ] Vision Service Corporation [ ] Health Maintenance Organization [ X ] Unter [ 12/09/2004	· <u> </u>		ior Period) NAIC Compai	ny Code 10769	Employer's ID Nur	mber 30-0312489
Licensed as business type: Life, Accident & Health [ ] Peroperty/Casualty[ ] Health Maintenance Organization [ ] Dental Service Corporation [ ] Usion Service Corporation [ ] Health Maintenance Organization [ ] Usion Service Corporation [ ] Health Maintenance Organization [ ] Usion Service Corporation [ ] Health Maintenance Organization [ ] Statutory Home Office  800 Tower Rd., Suite 200	Organized under the Laws of	of	Michigan	, State of Domicil	e or Port of Entry	Michigan
Licensed as business type: Life, Accident & Health [ ] Peroperty/Casualty[ ] Health Maintenance Organization [ ] Dental Service Corporation [ ] Usion Service Corporation [ ] Health Maintenance Organization [ ] Usion Service Corporation [ ] Health Maintenance Organization [ ] Usion Service Corporation [ ] Health Maintenance Organization [ ] Statutory Home Office  800 Tower Rd., Suite 200	Country of Domicile			United States		
Incorporated/Organized   12/09/2004   Commenced Business   07/15/2005   Statutory Home Office   800 Tower Rd., Suite 200   Troy, MIL, US 48098   (Sirest and Number)   Saltutory Home Office   7700 Forsyth Boulevard   Saltutory Main Administrative Office   7700 Forsyth Boulevard   Saltutory Main Administrative Office   7700 Forsyth Boulevard   Saltutory Main Administrative Office   Troy Forsyth Boulevard   Saltutory Saltutory Main Administrative Office   Troy Forsyth Boulevard   Saltutory Saltutory Main Administrative Office   Troy Forsyth Boulevard   Size and Number or P.O. Box   (City or Town, State, Country and Zip Code)   (Avea Cote) (Telephone Number)   Troy Forsyth Boulevard   Saltutory State Main Main Main Main Main Main Main Main	Licensed as business type: Life, Accident & Health [ ] Property/Casualty [ ] Hospital, Medical & Dental Service Corporation [ ] Vision Service Corporation [ ] Health Maintenance				Health Maintenance Org	ganization [ X ]
Statutory Home Office    Some of Comment of	Incorporated/Organized		004 Comm	enced Rusiness		
Main Administrative Office (Sireet and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number) (Sireet and Number) (Sir				crioca Basiness		
Size and Number   City or Town, State, Country and Zip Code)   Cirea Code) (Telephone Number)	clatatory frome cines			,		
Mail Address	Main Administrative Office			Saint Louis	s, MO, US 63105	314-725-4477
City or Town, State, Country and 2 p Code)   City or Town, State, Country and State,		,	•	(City or Town, Sta		, , , , ,
Primary Location of Books and Records  7700 Forsyth Boulevard (Street and Number) (Name)  Catherine Helen Aplington (E-Mail Address)  (E-Mail Address)  (E-Mail Address)  OFFICERS  Name  Title Chirstopher Donald Bowers Jeffrey Allan Schwaneke Treasurer  OTHER OFFICERS Jesse Nathan Hunter  OTHER OFFICERS  Jesse Nathan Hunter  DIRECTORS OR TRUSTEES  Marcus Furlow  State of Missouri  Sea State of Missouri  Sea State of Saint Louis  Sea State of Missouri  County of Saint Louis  Sea State of Missouri  Sea State of Missouri  Sea State of Missouri  Sea State of Missouri  Sea State of Saint Louis  Sea State of Missouri  Sea State of Saint Louis  Sea State of Missouri  Sea State of Missouri  Sea State of Missouri  Sea State of Saint Louis  Sea State of Sea Sea State of Saint Louis  Sea State of Sea Sea State of S	Mail Address				(City or Town, State, Country	3 03 105 and Zin Code)
Internet Web Site Address  Statutory Statement Contact  Catherine Helen Aplington  Caplington@centene.com  (Refer Name)  Caplington@centene.com  (Refer Name)  Caplington@centene.com  (Refer Name)  Caplington@centene.com  (Refer Name)  OFFICERS  Name  Title  Chirstopher Donald Bowers  Jeffrey Allan Schwaneke  Treasurer  OTHER OFFICERS  Jesse Nathan Hunter  DIRECTORS OR TRUSTEES  Marcus Furlow  State of	Primary Location of Books ar	•	,	Saint I		
Statutory Statement Contact  Caplington@centene.com (E-Mail Address)  OFFICERS  Name  Title Chirstopher Donald Bowers Jeffrey Allan Schwaneke Treasurer  OTHER OFFICERS Jesse Nathan Hunter  OTHER OFFICERS Jesse Nathan Hunter  OTHER OFFICERS  Jesse Nathan Hunter  OTHER OFFICERS  Jesse Nathan Hunter  OTHER OFFICERS  Jesse Nathan Hunter  OTHER OFFICERS  Jesse Nathan Hunter  OTHER OFFICERS  Jesse Nathan Hunter  OTHER OFFICERS  Vice President  Tricia Lynn Dinkelman  Vice President of Tax   DIRECTORS OR TRUSTEES  Marcus Furlow  State of  Missouri  SS  County of  Saint Louis  SS  County of Issert of this reporting entity being duly swom, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that his statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and the ustatement of all the assets and islabilities and of the condition and affairs of the said reporting entity as of the said reporting entity and this tone the reporting of the said reporting entity and the tone of the period exhibits and of the incombine of the per	2000 0. 200 0.					
Caplington@centene.com  (E-Mail Address)  OFFICERS  Name Title Chirstopher Donald Bowers President Chirstopher Donald Bowers All Argus Accounting All Argus Accounting All Argus Accounting Accounting All Argus Accounting Accounting All Argus Accounting Accounti	Internet Web Site Address			http://www.fidelisso	c.com	
Caplington@centene.com  (E-Mail Address)  OFFICERS  Name Title Chirstopher Donald Bowers Jeffrey Allan Schwaneke Treasurer  OTHER OFFICERS Jesse Nathan Hunter  OTHER OFFICERS Jesse Nathan Hunter  DIRECTORS OR TRUSTEES  Marcus Furlow  State of Missouri Salint Louis  Salint Louis  Salint Louis  Salint Louis  The officers of this reporting entity being duly swom, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described eassets were the absolute property of the said reporting entity, free and clear from any lines or claims thereon, except as herein stated, and that statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity, as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that (1) state law may stiffer, or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, nowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electron lifting with the NAIC Amen required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various required of or in addition to the enclosed statement.  Chirstopher Donald Bowers President  Secretary  List the amendment number  Secretary  List the amendment number  2. Date filed	Statutory Statement Contact	Cath	erine Helen Aplington			
Name Title Name Title Name Title Name Title Secretary  Define Secretary  Define Secretary  Define Object Secretary  Define Object Secretary  Define Object Secretary  Define Object Secretary  DIRECTORS OR TRUSTEES  Jesse Nathan Hunter Missouri  Secretary  DIRECTORS OR TRUSTEES  Jesse Nathan Hunter Secretary  DIRECTORS OR TRUSTEES  Jesse Nathan Hunter Secretary  Secretary  Director Officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that its statement, together with related exhibits, schedules and explanations therein contained, annexed or fredered to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions thereform for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures manual except to the extent that: (1) state law may differ or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures manual except to the extent that: (1) state law may differ or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures manual except to the extent that: (1) state law may differ or, (2) that state rules or regulations require differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.	conlin	aton@contono com	` '			ımber) (Extension)
Name Chirstopher Donald Bowers Defire Allan Schwaneke Treasurer  OTHER OFFICERS Jesse Nathan Hunter Directors OR TRUSTEES  Jesse Nathan Hunter  Missouri Ss  County of Saint Louis The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that is statement, for gether with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and the statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, all of the income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement frastructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting on related to accounting practices and procedures manual except to the state with the NAIC Annual Statement, the succept of this attestation by the described officers also includes the related corresponding lection clifting with the NAIC when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.  Chirstopher Donald Bowers President  Keith Harvey Willimason Jeffrey Allan Schwaneke Treasurer  a. Is this an original filling?  Yes [X] No []  Subscribed and sworn to before me this  day of  1. State the amendment number  2. Date filed	Сарії					
Name Title Name Title Name Title Chirstopher Donald Bowers President President Keith Harvey Willimason Secretary  Jeffrey Allan Schwaneke Treasurer  OTHER OFFICERS  Jesse Nathan Hunter Vice President Tricia Lynn Dinkelman Vice President of Tax  DIRECTORS OR TRUSTEES  Jesse Nathan Hunter Marcus Furlow  State of Saint Louis Se  County of Saint Louis Se  County of Saint Louis Se  County of Fereindent Secretary of the said reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ, or, (2) that state rules or regulations required differences in reporting on telated to accounting practices and procedures manual except to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC who have required the second copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.  Chirstopher Donald Bowers Reith Harvey Willimason Secretary Jeffey Alian Schwaneke Treasurer  a. Is this an original filing?  Yes [x] No []  Subscribed and sworn to b		,	OFFI	CEDS	(	
Chirstopher Donald Bowers Treasurer  OTHER OFFICERS  Jesse Nathan Hunter Vice President Tricia Lynn Dinkelman Vice President of Tax  DIRECTORS OR TRUSTEES  Jesse Nathan Hunter Marcus Furlow  State of Saint Louis S  County of Saint Louis S  SS  County of Saint Louis S  SS  County of Saint Louis S  As and depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said perioring entity as of the reporting period stated above, and of that state rules or regulations reporting entity as of the reporting period stated above, all of that state rules or regulations required differences in reporting a concern and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or (2) that state rules or regulations required differences in reporting on or telated to accounting practices and procedures manual except to the extent that: (1) state law may differ or (2) that state rules or regulations regulated that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing with the NAIC where required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.  Chirstopher Donald Bowers Fresident  Chirstopher Donald Bowers Keith Harvey Willimason Secretary  Secretary  It is the amendmen	Name				ıe.	Title
DIRECTORS OR TRUSTEES		ers				
OTHER OFFICERS Jesse Nathan Hunter  DIRECTORS OR TRUSTEES  Jesse Nathan Hunter  DIRECTORS OR TRUSTEES  Marcus Furlow  State of				Rolli Flaivey	,,	Cooletaly
DIRECTORS OR TRUSTEES  Jesse Nathan Hunter  Missouri		·		NEELOE DO	,,	
DIRECTORS OR TRUSTEES  Jesse Nathan Hunter  Marcus Furlow  State of	Inna Nathan Illinotan				No los los sos	Vice Descident of Tex
County of	Jesse Nathan Hunter	. <u> </u>		OR TRUSTEES	<b>-</b>	
President Secretary Treasurer  a. Is this an original filing?  Subscribed and sworn to before me this day of,	County of	ty being duly sworn, ear assets were the absoluted exhibits, schedules of the said reporting entite the NAIC Annual Stregulations require diffely. Furthermore, the socopy (except for forma	ach depose and say that they a ute property of the said reporting and explanations therein contitity as of the reporting period statement Instructions and Acciferences in reporting not relative tope of this attestation by the cutting differences due to electrons.	ng entity, free and clear frained, annexed or referr tated above, and of its in counting Practices and P ed to accounting practic described officers also in-	om any liens or claims thereored to, is a full and true statem come and deductions therefroredures manual except to tes and procedures, accordincludes the related correspond	n, except as herein stated, and that nent of all the assets and liabilities om for the period ended, and have the extent that: (1) state law may g to the best of their information, ling electronic filing with the NAIC,
Subscribed and sworn to before me this b. If no: day of, 1. State the amendment number 2. Date filed					Jeffrey	
Subscribed and sworn to before me this b. If no: day of, 1. State the amendment number 2. Date filed					a. Is this an original filing?	Yes [ X ] No [ ]
3. Number of pages attached					b. If no: 1. State the amendment	
					3. Number of pages atta	ched

## **ASSETS**

		DOLIO			
			Current Statement Date		4
		1	2	3	Day with at
				Not Admitted Asset	December 31
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Prior Year Net Admitted Assets
				<u> </u>	
1.	Bonds	1,097,690		1,097,690	1,097,420
2.	Stocks:				
	2.1 Preferred stocks			0	0
	2.2 Common stocks			<u> </u> 0	0
_					
3.	Mortgage loans on real estate:				
	3.1 First liens			0	0
	3.2 Other than first liens			l0	L0
4	Real estate:				
4.					
	4.1 Properties occupied by the company (less				
	\$encumbrances)			<u>l</u> 0	0
	4.2 Properties held for the production of income				
	·				
	(less \$ encumbrances)			0	J0
	4.3 Properties held for sale (less				
	\$ encumbrances)			١	1
				u	I
5.	Cash (\$126, 102 ),				
	cash equivalents (\$				
	and short-term investments (\$0 )	126 102		126 102	2 663 451
_				i .	
	Contract loans (including \$ premium notes)			i	ļ0
7.	Derivatives	<b></b> 0		J0	0
	Other invested assets			<u> </u> 0	0
	Receivables for securities			.0	0
	Securities lending reinvested collateral assets				
11.	Aggregate write-ins for invested assets	0	0	0	0
	Subtotals, cash and invested assets (Lines 1 to 11)				
				1,220,702	
13.	Title plants less \$charged off (for Title insurers				
	only)			l0	0
14.	Investment income due and accrued	5.937		5,937	3.187
		, , , , , , , , , , , , , , , , , , , ,		, , , , , , , , , , , , , , , , , , , ,	, , ,
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of				
	collection	294,033		294,033	206,114
	15.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$earned				
	but unbilled premiums)			0	0
	15.3 Accrued retrospective premiums (\$) and				
	contracts subject to redetermination (\$1,068,959 )	1 060 050		1 060 050	1 060 050
	contracts subject to redetermination (\$			1,000,939	1,000,939
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers			0	0
	16.2 Funds held by or deposited with reinsured companies			0	1
	16.3 Other amounts receivable under reinsurance contracts			0	J
17.	Amounts receivable relating to uninsured plans	260,800		260,800	260,800
	Current federal and foreign income tax recoverable and interest thereon			351,019	517.668
				i	,
	2 Net deferred tax asset			0	ļ0
19.	Guaranty funds receivable or on deposit			L0	J0
20.	Electronic data processing equipment and software			0	0
	Furniture and equipment, including health care delivery assets				
۷۱.				1	_
	(\$)				l <sup>0</sup>
22.	Net adjustment in assets and liabilities due to foreign exchange rates	ļ		0	J0
23.	Receivables from parent, subsidiaries and affiliates	2.000.000	<u> </u>	2,000,000	0
	Health care (\$4,829,674 ) and other amounts receivable			4,829,674	
				i	i
25.	Aggregate write-ins for other-than-invested assets	41,988	J14,310	27 ,678	26,076
26.	Total assets excluding Separate Accounts, Segregated Accounts and				
	Protected Cell Accounts (Lines 12 to 25)	10,096,968	35,076	10,061,892	11,294,039
^-		10,000,000	00,010	10,001,002	11,207,000
27.	From Separate Accounts, Segregated Accounts and Protected				
	Cell Accounts.		ļ	<b></b> 0	<b></b> 0
28	Total (Lines 26 and 27)	10,096,968	35.076	10,061,892	11,294,039
_0.		10,000,000	00,070	10,001,002	11,204,000
	DETAILS OF WRITE-INS				
1101.				<b></b> 0	0
1102.				n	n
_				1	^
1103.			<del> </del>	<del> </del> <sup>0</sup>	J0
1198.	Summary of remaining write-ins for Line 11 from overflow page	J	0	0	0
	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0	0
				0	
	Prepaid Assets			i	l0
2502.	State Income Tax Receivable	27,678	ļ	27,678	26,076
2503.				1 0	L0
	Summary of remaining write-ins for Line 25 from overflow page			0	^
	Summary of remaining write-ins for Line 25 from overflow page	ļ		I	۱
	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	41,988	14,310	27,678	26,076

## **LIABILITIES, CAPITAL AND SURPLUS**

LIABILITIES, CAP		Current Period		Prior Year
	1 Covered	2 Uncovered	3 Total	4
Claims unpaid (less \$reinsurance ceded)		Oncovered	Total 487.398	Total 3.363.421
Accrued medical incentive pool and bonus amounts			0	0
Unpaid claims adjustment expenses	23,534		23,534	36,028
Aggregate health policy reserves including the liability of				
\$ for medical loss ratio rebate per the Public Health	1 020 104		1 020 104	2 172 264
Service Act				
Aggregate life policy reserves     Property/casualty unearned premium reserve				0
7. Aggregate health claim reserves				
8. Premiums received in advance				
General expenses due or accrued	1,280,629		1,280,629	669,500
10.1 Current federal and foreign income tax payable and interest thereon (including				
\$on realized gains (losses))				
10.2 Net deterred tax liability				
Amounts withheld or retained for the account of others				0
13. Remittances and items not allocated				0
14. Borrowed money (including \$ current) and				
interest thereon \$ (including				
\$ current)				
Amounts due to parent, subsidiaries and affiliates		0		
17. Payable for securities				0
Payable for securities lending				0
19. Funds held under reinsurance treaties (with \$				
authorized reinsurers, \$ unauthorized reinsurers				
and \$ certified reinsurers)			0	0
20. Reinsurance in unauthorized and certified (\$)			0	0
companies				0
Net adjustments in assets and natimities due to foreign exchange rates      Liability for amounts held under uninsured plans				0
23. Aggregate write-ins for other liabilities (including \$				
current)	0	0	0	0
24. Total liabilities (Lines 1 to 23)				
25. Aggregate write-ins for special surplus funds				
Common capital stock		XXX		
Preferred capital stock     Gross paid in and contributed surplus			l l	5 824 999
29. Surplus notes				
30. Aggregate write-ins for other-than-special surplus funds				0
31. Unassigned funds (surplus)	xxx	xxx	(1,892,589)	(1,795,102)
32. Less treasury stock, at cost:				
32.1shares common (value included in Line 26				
\$	XXX	XXX		
\$	xxx	xxx		0
33. Total capital and surplus (Lines 25 to 31 minus Line 32)		XXX		5,013,049
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	10,061,892	11,294,039
DETAILS OF WRITE-INS				
2301.			0	0
2302.				
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	0	0	0	0
2501. 2016 Health Insurer Fee Estimate	xxx	XXX	0	983 , 151
2502.				,
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page				0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX	0	983,151
3001.			-	,
3002.				
3003.				0
3098. Summary of remaining write-ins for Line 30 from overflow page			i	0
			0	0
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX	U	U

## STATEMENT OF REVENUE AND EXPENSES

	STATEMENT OF REVENU				
		Current Ye	ar To Date	Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1. Men	mber Months.				
	premium income (including \$ non-health premium income)			1	
3. Cha	ange in unearned premium reserves and reserve for rate credits	xxx		0	0
	-for-service (net of \$medical expenses)				
5. Risk	k revenue	XXX		0	0
	regate write-ins for other health care related revenues				
	regate write-ins for other non-health revenues				
8. Tota	al revenues (Lines 2 to 7)	XXX	12,864,460	10,720,548	60 , 547 , 362
Hospital and	d Madical:				
1 '	spital/medical benefits		11.750.450	7.277.185	51.230.778
i	er professional services		i	1 1	
1	side referrals			1	
1	ergency room and out-of-area			1	
	scription drugs				
	gregate write-ins for other hospital and medical				
	entive pool, withhold adjustments and bonus amounts				
16. Sub	ototal (Lines 9 to 15)	0	11,882,515	10,320,151	55,382,356
Less:					
i	reinsurance recoveries			0	0
i	al hospital and medical (Lines 16 minus 17)			i i	
1	n-health claims (net)			1	
1	ims adjustment expenses, including \$ 5,973cost containment			1	
1	enses				
21. Gen	neral administrative expenses		2,196,731	499,949	5 , 463 , 541
22. Incre	rease in reserves for life and accident and health contracts (including				
1	increase in reserves for life only)			1	
1	al underwriting deductions (Lines 18 through 22)				
24. Net	underwriting gain or (loss) (Lines 8 minus 23)	XXX			
25. Net	investment income earned		3,021	1,212	9,597
	realized capital gains (losses) less capital gains tax of \$			0	0
1		0	3,021	1,212	9,597
	gain or (loss) from agents' or premium balances charged off [(amount recovered				
1	) (amount charged off \$	0		0	
	gregate write-ins for other income or expenses	0	0	63 , 128	84 , 171
Ju. Net	income or (loss) after capital gains tax and before all other federal income taxes Lines 24 plus 27 plus 28 plus 29)	XXX	(1,338,579)	(201,862)	(4,073,223)
31. Fed	leral and foreign income taxes incurred	xxx	(139,784)	0	(722,467)
32. Net	income (loss) (Lines 30 minus 31)	XXX	(1,198,795)	(201,862)	(3,350,756)
DET	TAILS OF WRITE-INS				
0601		XXX		ļ0	0
0602		XXX		0	0
0603		XXX		0	0
	nmary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
	als (Lines 0601 through 0603 plus 0698) (Line 6 above)	XXX	0	0	0
0701		XXX		0	0
0702		XXX		1	٠
	nmary of remaining write-ins for Line 7 from overflow page	XXXXXX		<sub>^</sub>	0
	als (Lines 0701 through 0703 plus 0798) (Line 7 above)	XXX	0	0	n
1401	and (=ou of or a modern of ou place of our ( Either above)	7077			0
1402				n	0
1,400				0	0
		0	0	0	0
	als (Lines 1401 through 1403 plus 1498) (Line 14 above)	0	0	0	0
2901. OTHE	ER INCOME			63 , 128	84 , 171
2902					
2903					
2998. Sum	nmary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999. Tota	als (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	0	63,128	84,171

**STATEMENT OF REVENUE AND EXPENSES (Continued)** 

	STATEMENT OF REVENUE AND EX	PENSES (	Continue	u)
		1	2	3
		Current Year To Date	Prior Year To Date	Prior Year Ended December 31
	CAPITAL & SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	5,013,048	4,878,107	4,878,107
34.	Net income or (loss) from Line 32	(1,198,795)	(201,862)	(3,350,756)
35.	Change in valuation basis of aggregate policy and claim reserves		0	0
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$		0	0
37.	Change in net unrealized foreign exchange capital gain or (loss)		0	0
38.	Change in net deferred income tax		0	(230,000)
39.	Change in nonadmitted assets	118 , 159	(14,542)	586,972
40.	Change in unauthorized and certified reinsurance	0	0	0
41.	Change in treasury stock		0	0
42.	Change in surplus notes	0	0	0
43.	Cumulative effect of changes in accounting principles		0	0
44.	Capital Changes:			
	44.1 Paid in		0	0
	44.2 Transferred from surplus (Stock Dividend)		0	0
	44.3 Transferred to surplus		0	0
45.	Surplus adjustments:			
	45.1 Paid in	2,000,000	0	3,200,000
	45.2 Transferred to capital (Stock Dividend)	0	0	0
	45.3 Transferred from capital		0	0
46.	Dividends to stockholders		0	0
47.	Aggregate write-ins for gains or (losses) in surplus	0	0	(71,275)
48.	Net change in capital and surplus (Lines 34 to 47)	919,364	(216,404)	134,941
49.	Capital and surplus end of reporting period (Line 33 plus 48)	5,932,412	4,661,703	5,013,048
	DETAILS OF WRITE-INS			
4701.	ROUND ING.		0	0
4702.	2014 Annual Filing Correction		0	(71,275)
4703.				
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	0	0	(71,275)

## **CASH FLOW**

		1	2	3
		Current Year To Date	Prior Year To Date	Prior Year Ended December 31
	Cash from Operations			
1. Premi	iums collected net of reinsurance	12,776,541	10,720,548	59,273,98
	vestment income	0	1,218	7 ,51
<ol><li>Misce</li></ol>	llaneous income	0	0	
4. Total	(Lines 1 to 3)	12,776,541	10,721,766	59,281,50
5. Benef	fit and loss related payments	14,024,459	9,401,243	59,526,62
	ansfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		0	
7. Comm	nissions, expenses paid and aggregate write-ins for deductions	1,595,863	1,312,099	7 , 196 , 39
8. Divide	ends paid to policyholders		0	
9. Federa	al and foreign income taxes paid (recovered) net of \$tax on capital			
gains	(losses)	(306, 433)	0	(204,79
10. Total	(Lines 5 through 9)	15,313,889	10,713,342	66,518,22
11. Net ca	ash from operations (Line 4 minus Line 10)	(2,537,348)	8,424	(7,236,71
	Cash from Investments		·	, , ,
12. Proce	eds from investments sold, matured or repaid:			
		0	0	524,00
	Stocks	0	0	
12.3 N	Mortgage loans	0	0	
12.4 F	Real estate		0	
12.5 (	Other invested assets	0	0	
12.6 N	Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	
12.7 N	Miscellaneous proceeds	0	0	
	Total investment proceeds (Lines 12.1 to 12.7)	0	0	524,00
	of investments acquired (long-term only):			,
	Bonds	0	0	1,096,82
		0	0	
	Mortgage loans	0	0	
13.4 F	Real estate	0	0	
13.5 (	Other invested assets	0	0	
13.6 N	Miscellaneous applications	0	0	
13.7 T	Fotal investments acquired (Lines 13.1 to 13.6)	0	0	1,096,82
	crease (or decrease) in contract loans and premium notes	0	0	
	ash from investments (Line 12.8 minus Line 13.7 and Line 14)	0	0	(572,82
110100	Cash from Financing and Miscellaneous Sources	-		(**-)*-
16 Cash	provided (applied):			
		0	0	
	Capital and paid in surplus, less treasury stock.	<b>_</b>	0	3,200,00
		0	0	
	Net deposits on deposit-type contracts and other insurance liabilities		0	
	Dividends to stockholders	0	0	
	Other cash provided (applied)	0	0	
17. Net ca	ash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 ine 16.6)	0	0	3,200,00
·R	ECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net ch	nange in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(2,537,348)	8,424	(4,609,53
	cash equivalents and short-term investments:	, , , , , , , , , , , , ,	, =:	. , , , , , , ,
		2,663,450	7 , 272 , 988	7 , 272 , 98
	End of period (Line 18 plus Line 19.1)	126,102	7,281,412	2,663,45

#### \_

### STATEMENT AS OF MARCH 31, 2016 OF THE Fidelis SecureCare of Michigan Inc.

### **EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION**

	1	Compreh (Hospital &	nensive Medical)	4	5	6	7	8	9	10
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	7 ,540	0	0	0	0	0	0	4,626	2,914	
2. First Quarter	5,017	0	0	0	0	0	0	2,585	2,432	
3. Second Quarter	0	0	0	0	0	0	0	0	0	
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	16,067							8,108	7,959	
Total Member Ambulatory Encounters for Period:										
7. Physician	7 , 184							5,212	1,972	
8. Non-Physician	4,364							1,140	3,224	
9. Total	11,548	0	0	0	0	0	0	6,352	5,196	(
10. Hospital Patient Days Incurred	870							439	431	
11. Number of Inpatient Admissions	218							110	108	
12. Health Premiums Written (a)	12,864,460							9 ,997 , 182	2,867,278	
13. Life Premiums Direct	0									
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	0									
16. Property/Casualty Premiums Earned	0									
17. Amount Paid for Provision of Health Care Services	14 ,758 ,539							11,636,584	3 , 121 , 955	
18. Amount Incurred for Provision of Health Care Services	11,882,515							9,065,549	2,816,966	

<sup>(</sup>a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

## CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

	Aging Analysis of Unpaid	d Claims				
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
Claims unpaid (Reported)						
Claims unpaid (Reported) Express Scripts Inc	383,968					383,968
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	<b>†</b>				<u> </u>	
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					İ	
0199999 Individually listed claims unpaid	383,968	0	0	0	0	
0299999 Aggregate accounts not individually listed-uncovered.						0
0399999 Aggregate accounts not individually listed-covered	103,430					103,430
0499999 Subtotals	487,398	0	0	0	0	487,398
0599999 Unreported claims and other claim reserves	XXX	XXX	XXX	XXX	XXX	Í
0699999 Total amounts withheld	XXX	XXX	XXX	XXX	XXX	
0799999 Total claims unpaid	XXX	XXX	XXX	XXX	XXX	487,398
0899999 Accrued medical incentive pool and bonus amounts	XXX	XXX	XXX	XXX	XXX	Í
·					•	

### **UNDERWRITING AND INVESTMENT EXHIBIT**

#### ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

ANAL 1919 OF CLAIMS UNPAID-F	Clai	ms	Liab			
	Paid Yea		End of Curr			6
Line of Business	On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year
		Ŭ .		<u> </u>		
Comprehensive (hospital and medical)					0	0
2. Medicare Supplement					0	0
3. Dental only					0	0
4. Vision only					0	0
Federal Employees Health Benefits Plan					0	0
6. Title XVIII - Medicare	3,074,561	12,595,025	12,112	444,828	3,086,673	3,027,975
7. Title XIX - Medicaid	343,797	3,595,597	3,701	26,756	347 , 498	335 , 446
8. Other health		0			0	0
9. Health subtotal (Lines 1 to 8)	3,418,358	16 , 190 , 622	15,813	471,584	3 ,434 , 171	3,363,421
10. Health care receivables (a)		4,850,440			0	0
11. Other non-health					0	0
12. Medical incentive pools and bonus amounts					0	۵
13. Totals (Lines 9-10+11+12)	3,418,358	11,340,182	15,813	471,584	3,434,171	3,363,421

<sup>(</sup>a) Excludes \$ ..... loans or advances to providers not yet expensed.

#### 1. Summary of Significant Accounting Policies

### A. Accounting Practices

The financial statements of Fidelis SecureCare of Michigan, Inc. (the Company) are presented on the basis of accounting practices prescribed or permitted by the Michigan Department of Insurance.

The State of Michigan requires that insurance companies domiciled in the state of Michigan prepare their statutory basis financial statements in accordance with the NAIC *Accounting Practices and Procedures Manual* subject to any deviations prescribed or permitted by the State of Michigan Insurance Commissioner.

NET INCOME	State of Domicile	 2016	 2015
(1) Fidelis SecureCare of Michigan, Inc. state basis (Page 4, Line 32, Columns 2 & 4)	M ichigan	\$ (1,198,796)	\$ (3,350,755)
(2) State Prescribed Practices that increase/(decrease) NAIC SAP: e.g., Depreciation of fixed assets	M ichigan	\$ 	\$ <u>-</u>
(3) State Permitted Practices that increase/(decrease) NAIC SAP: e.g., Depreciation of fixed assets, home office property	M ichigan	\$ 	\$ 
(4) NAIC SAP (1-2-3=4)	M ichigan	\$ (1,198,796)	\$ (3,350,755)
SURPLUS			
(5) Fidelis SecureCare of Michigan, Inc. state basis (Page 3, Line 33, Columns 3 & 4)	M ichigan	\$ 5,932,411	\$ 5,013,049
(6) State Prescribed Practices that increase/(decrease) NAIC SAP: e.g., Goodwill, net e.g., Fixed Assets, net	M ichigan	\$ _	\$ _
(7) State Permitted Practices that increase/(decrease) NAIC SAP:			
e.g., Home Office Property	Michigan	\$ 	\$ 
(8) NAIC SAP (5-6-7=8)	M ichigan	\$ 5,932,411	\$ 5,013,049

#### B. Use of Estimates in the Preparation of the Financial Statements

No Change

### C. Accounting Policy

No Change

#### 2. Accounting Changes and Corrections of Errors

No Change

#### 3. Business Combinations and Goodwill

No Change

### 4. Discontinued Operations

No Change

#### 5. Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

No Change

B. Debt Restructuring

No Change

C. Reverse Mortgages

No Change

D. Loan-Backed Securities

No Change

E. Repurchase Agreements and/or Securities Lending Transactions

No Change

F. Real Estate

No Change

G. Investments in Low-Income Housing Tax Credits (LIHTC)

No Change

- H. Restricted Assets
  - 1. Restricted Assets (Including Pledged)

	1	2	3	4	5	6
						Percentage
						Admitted
		Total Gross			Percentage	Restricted
	Total Gross	Restricted	Increase/	Total Current	Gross	to Total
	Restricted from	From Prior	(Decrease)	Year Admitted	Restricted to	Admitted
Restricted Asset Category	Current Year	Year	(1 minus 2)	Restricted	Total Assets	Assets
a. Subject to contractual						
obligation for which liability						
is not shown						
b. Collateral held under						
security lending agreements						
c. Subject to repurchase						
agreements						
d. Subject to reverse						
repurchase agreements						
e. Subject to dollar						
repurchase agreements						
f. Subject to dollar reverse						
repurchase agreements						
g. Placed under option						
contracts						
h. Letter stock or securities						
restricted as to sale						
i. FHLB capital stock						
j. On deposit with states	\$ 1,097,690	\$ 1,097,420	\$ 270	\$ 1,097,690	10.9%	10.9%
k. On deposit with other						
regulatory bodies						
l. Pledged collateral to						
FHLB (including assets						
backing funding						
m. Pledged as collateral not						
captured in other categories						
n. Other restricted assets						
o. Total Restricted Assets	\$ 1,097,690	\$ 1,097,420	\$ 270	\$ 1,097,690	10.9%	10.9%

- 2. Detail of Assets Pledged as Collateral Not Captured in Other Categories None
- 3. Detail of Other Restricted Assets None
- I. Working Capital Finance Investments

None

J. Offsetting and Netting of Assets and Liabilities

None

K. Structured Notes

None

6. Joint Ventures, Partnerships and Limited Liability Companies

No Change

7. Investment Income

No Change

8. Derivative Instruments

No Change

9. Income Tax

No Change

#### 10. Information Concerning Parent, Subsidiaries and Affiliates

A., B., C., D. – Included in the Company's balance sheet as of March 31, 2016 is a \$2.0 million receivable from the parent company, Centene Corporation. During 2016 and 2015, Centene Corporation funded capital contributions totaling \$2.0 million and \$3.2 million, respectively, to the Company.

- E. Guarantees No change
- F. Material management or service contracts No change
- G. Control Relationship No change
- H. Upstream Intermediate Entity No change
- I. Investment in an SCA entity No change
- J. Investments in impaired SCA entities No change
- K. Investment in a Foreign Insurance Subsidiary No change
- L. Investment in Downstream Noninsurance Holding Company No change

#### 11. Debt

None

## 12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A. Defined Benefit Plan

None

B. Investment Policies and Strategies for Plan Assets

No Change

C. Fair Value of Each Class of Plan Assets

No Change

D. Basis used to Determine the Overall Expected Long-Term Rate-of-Return-on-Assets Assumption

No Change

E. Defined Contribution Plan

No Change

F. Multiemployer Plans

No Change

G. Consolidated/Holding Company Plans

No Change

H. Postemployment Benefits and Compensated Absences

No Change

I. Impact of Medicare Modernization Act on Post Retirement Benefits

No Change

### 13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

No Change

### 14. Contingencies

A. Contingent Commitments

No Change

B. Assessments

No Change

C. Gain Contingencies

No Change

D. Claims Related Extra Contractual Obligations and Bad Faith Losses Stemming from Lawsuits

No Change

E. Joint and Several Liabilities

No Change

F. All Other Contingencies

No Change

#### 15. Leases

No Change

16. Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

No Change

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

None

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

No Change

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

No Change

### 20. Fair Value Measurement

A. Assets and liabilities recorded at fair value in the statutory statement of admitted assets, liabilities and capital and surplus are categorized based upon the extent to which the fair value estimates are based upon observable or unobservable inputs.

Level inputs are as follows:

Level input	Input definition
Level I	Inputs are unadjusted, quoted prices for identical assets or liabilities in active markets at the measurement date.
Level II	Inputs other than quoted prices included in Level I that are observable for the asset or liability through corroboration with market data at the measurement date.
Level III	Unobservable inputs that reflect management's best estimate of what market participants would use in pricing the asset or liability at the measurement date.

The following table summarizes fair value measurements by level at March 31, 2016 for assets and liabilities measured at fair value on a recurring basis:

Description for each class of asset or liability	(I	Level 1)	(L	evel 2)	(L	evel 3)		Total
a. Assets at fair value								
Cash and Short-Term Investments								
Cash	\$	126,102	\$	-	\$	-	\$	126,102
Short-Term Investments	\$	-		-		-		-
Total Cash and Short-Term Investments	\$	126,102	\$	-	\$	-	\$	126,102
Perpetual Preferred stock								
Industrial and Misc	\$	-	\$	-	\$	-	\$	-
Parent, Subsidiaries and Affiliates		-		-		-		
Total Perpetual Preferred Stocks	\$	-	\$	-	\$	-	\$	-
Bonds								
U.S. Governments	\$	-	\$	-	\$	-		\$ -
Industrial and Misc		-		-		-		-
Hybrid Securities		_		-		-		-
Parent, Subsidiaries and Affiliates		_		-		-		-
Total Bonds	\$	-		-		-		\$ -
Common Stock								
Industrial and Misc	\$	_	\$	-	\$	-		\$ -
Parent, Subsidiaries and Affiliates		_		-		-		-
Total Common Stocks	\$	-	\$	-	\$	-		\$ -
Derivative assets								
Interest rate contracts	\$	-	\$	;	- :	\$	-	\$ -
Foreign exchange contracts		-			-		-	-
Credit contracts		_			-		-	-
Commodity futures contracts		_			-		-	-
Commodity forward contracts		_			-		-	-
Total Derivatives	-	3 -		;	- :	\$	-	\$ -
Separate account assets	-	3 -					-	\$ -
Total assets at fair value	\$	126,10				\$		\$ 126,102
b. Liabilities at fair value								
Derivative liabilities		\$ -		\$	_	\$	_	\$ -
Total liabilities at fair value	_	\$ -		<u>}</u>		\$		\$ -
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The following table summarizes fair value measurements by level at December 31, 2015 for assets and liabilities measured at fair value on a recurring basis:

Description for each class of asset or liability	(Le	vel 1)	(Le	vel 2)	(Le	vel 3)	T	otal
a. Assets at fair value								
Cash and Short-Term Investments								
Cash	\$ 2,0	663,451	\$	-	\$	-	\$ 2,	663,451
Short-Term Investments	\$	-		-		-		-
Total Cash and Short-Term Investments	\$ 2,0	663,451	\$	-	\$	-	\$ 2,	663,451
Perpetual Preferred stock								
Industrial and Misc	\$	-	\$	-	\$	-	\$	-
Parent, Subsidiaries and Affiliates		-		-		-		-
Total Perpetual Preferred Stocks	\$	-	\$	-	\$	-	\$	-
Bonds								
U.S. Governments	\$	-	\$	-	\$	-	\$	-
Industrial and Misc		-		-		-		-
Hybrid Securities		-		-		-		-
Parent, Subsidiaries and Affiliates		-		-		-		-
Total Bonds	\$	-	\$	-	\$	-	\$	-
Common Stock								
Industrial and Misc	\$	-	\$	-	\$	-	\$	-
Parent, Subsidiaries and Affiliates				_		-		
Total Common Stocks	\$	-	\$	-	\$	-	\$	-

Derivative assets						
Interest rate contracts	\$	-	\$ -	\$ -	\$	-
Foreign exchange contracts		-	-	-		-
Credit contracts		-	-	-		-
Commodity futures contracts		-	-	-		-
Commodity forward contracts		-	 -	 -		
Total Derivatives	\$	-	\$ -	\$ -	\$	-
Separate account assets	\$	-	\$ -	\$ -	\$	-
Total assets at fair value	\$ 2,	663,451	\$ -	\$ -	\$ 2,	663,451
b. Liabilities at fair value						
Derivative liabilities	\$	-	\$ -	\$ -	\$	
Total liabilities at fair value	\$	_	\$ -	\$ -	\$	-

#### B. None

C. The following table summarizes the aggregate fair value measurements by level at March 31, 2016 for all financial instruments.

Type of Financial Instrument	ggregate air Value	Admitted Assets	]	Level I	I	evel II	Lev	el III	Pract (Car	Not ticable rying llue)
Total Cash and										
Short-Term Investments	\$ 126,102	\$ 126,102	\$	126,102	\$	-	\$	-	\$	-
Bonds	1,105,324	1,097,690		1,105,324		-		-		-
Common Stock	-	-		-		-		-		-
Perpetual Preferred Stock	-	-		-		-		-		-
Mortgage Loans	 	 								
Total	\$ 1,231,426	\$ 1,223,792	\$	1,231,426	\$		\$	-	\$	

The following table summarizes the aggregate fair value measurements by level at December 31, 2015 for all financial instruments.

Type of Financial Instrument	ggregate air Value	 Admitted Assets		Level I	Le	evel II	Lev	el III	Pract (Car	ticable trying tlue)
Total Cash and										
Short-Term Investments	\$ 2,663,451	\$ 2,663,451	\$	2,663,451	\$	-	\$	-	\$	-
Bonds	1,095,059	1,097,420		1,095,059		-		-		-
Common Stock	-	-		-		-		-		-
Perpetual Preferred Stock	-	-		-		-		-		-
Mortgage Loans	 	 	_			-				
Total	\$ 3,758,510	\$ 3,760,871	\$	3,758,510	\$	-	\$		\$	

### D. None

### 21. Other Items

A. Extraordinary Items

No Change

B. Troubled Debt Restructuring: Debtors

No Change

C. Other Disclosures and Unusual Items

No Change

D. Business Interruption Insurance Recoveries

No Change

E. State Transferable and Non-Transferable Tax Credits

No Change

F. Subprime Mortgage Related Risk Exposure

No Change

G. Retained Assets

No Change

#### 22. Events Subsequent

Subsequent events have been considered through May 13, 2016, the date these statutory statements were issued.

Type I – Recognized Subsequent Events – A capital contribution of \$2.0 million was made by the parent (Centene Corporation) subsequent to March 31, 2016, but prior to the filing of these statutory financial statements on May 13, 2016. The capital contribution receivable was reported as an admitted asset on the March 31, 2016 statutory financial statements, with the approval of the Michigan Department of Insurance and Financial Services. Funds were received by the Company prior to the filing of the financial statements.

Type II – Nonrecognized Subsequent Events – No change.

#### 23. Reinsurance

The Company holds no reinsurance contracts as of March 31, 2016.

#### 24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

E. Risk Sharing Provisions of the Affordable Care Act (ACA) – None

#### 25. Change in Incurred Claims and Claim Adjustment Expenses

Reserves for incurred claims and claim adjustment expenses as of December 31, 2015 were \$3.4 million. As of March 31, 2016, \$3.4 million has been paid for incurred claims and claims adjustment expense attributable to insured events of prior years. Reserves remaining for prior years are now \$0.0 million as a result of re-estimation of unpaid claims and claims adjustment expenses. The change is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

#### 26. Intercompany Pooling Arrangements

No Change

### 27. Structured Settlements

No Change

### 28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

No Change

B. Risk Sharing Receivables

No Change

### 29. Participating Policies

No Change

### 30. Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves \$1,939,104

2. Date of the most recent evaluation of this liability April 30, 2016

3. Was anticipated investment income utilized in this calculation?

### 31. Anticipated Salvage and Subrogation

No Change

### **GENERAL INTERROGATORIES**

# PART 1 - COMMON INTERROGATORIES GENERAL

1.1	Did the reporting entity experience any material to Domicile, as required by the Model Act?					Ye	es [ ]	No [X]
1.2	If yes, has the report been filed with the domicilia					Ye	es [ ]	No [ ]
2.1	Has any change been made during the year of the reporting entity?					Υe	es []	No [X]
2.2	If yes, date of change:							
3.1	Is the reporting entity a member of an Insurance which is an insurer?					Υe	es [X]	No [ ]
	If yes, complete Schedule Y, Parts 1 and 1A.							
3.2	Have there been any substantial changes in the	organizational chart since the prior quarte	r end?			Υe	es [X]	No [ ]
3.3	If the response to 3.2 is yes, provide a brief desc On March 24, 2016, Fidelis SecureCare of Mic Net, Inc. (Health Net) for approximately \$6 have been added to Schedule Y, Parts 1 and	chigan's parent company, Centene Corp .0 billion, including the assumption	of debt. Health Net and	d its subsidi	aries			
4.1	Has the reporting entity been a party to a merger	or consolidation during the period covere	ed by this statement?			Ye	es [ ]	No [X]
4.2	If yes, provide the name of entity, NAIC Compan ceased to exist as a result of the merger or const		ter state abbreviation) fo	r any entity th	at has			
		1 Name of Entity	2 NAIC Company Code	3 State of D				
5.	If the reporting entity is subject to a management fact, or similar agreement, have there been any self yes, attach an explanation.					Yes [ ] 1	No [X]	NA [ ]
6.1	State as of what date the latest financial examina						12/	31/2012
6.2	State the as of date that the latest financial examined baths date should be the date of the examined baths.	nination report became available from eith lance sheet and not the date the report w	er the state of domicile of as completed or released	r the reporting	entity.		12/	31/2012
6.3	State as of what date the latest financial examina or the reporting entity. This is the release date or sheet date).	completion date of the examination repo	t and not the date of the	examination	balance		06/	24/2014
6.4	By what department or departments?							
	Michigan Department of Insurance and Finance							
6.5	Have all financial statement adjustments within the statement filed with Departments?					Yes [ ] 1	No [ ]	NA [X]
6.6	Have all of the recommendations within the lates	t financial examination report been comp	ied with?			Yes [X] M	No [ ]	NA [ ]
7.1	Has this reporting entity had any Certificates of A suspended or revoked by any governmental entit					Ye	es [ ]	No [X]
7.2	If yes, give full information:							
8.1	Is the company a subsidiary of a bank holding co	ompany regulated by the Federal Reserve				Ye	es [ ]	No [X]
8.2	, , , , , , , , , , , , , , , , , , , ,	<b>5</b> . ,						
8.3	Is the company affiliated with one or more banks	, thrifts or securities firms?				Υe	es [ ]	No [X]
8.4	If response to 8.3 is yes, please provide below the federal regulatory services agency [i.e. the Feder Deposit Insurance Corporation (FDIC) and the S regulator.]	ral Reserve Board (FRB), the Office of the	Comptroller of the Curr	ency (OCC), t	he Federal			
	1	2 Location	3	4	5	6		

1	2	3	4	5	6
	Location				
Affiliate Name	(City, State)	FRB	occ	FDIC	SEC

### GENERAL INTERROGATORIES

9.1	Are the senior officers (principal executive officer, principal financial officer, principal similar functions) of the reporting entity subject to a code of ethics, which includes					Yes [X]	No [ ]
	(a) Honest and ethical conduct, including the ethical handling of actual or appare	ent conflic	ts of interest between pers	sonal and	d professional relationships	i,	
	(b) Full, fair, accurate, timely and understandable disclosure in the periodic report	rts require	ed to be filed by the report	ing entity	r;		
	(c) Compliance with applicable governmental laws, rules and regulations;						
	(d) The prompt internal reporting of violations to an appropriate person or person	ns identifi	ed in the code; and				
	(e) Accountability for adherence to the code.						
9.11	If the response to 9.1 is No, please explain:						
9.2	Has the code of ethics for senior managers been amended?					Yes []	No [X]
	If the response to 9.2 is Yes, provide information related to amendment(s).						
9.21	il the response to 9.2 is res, provide illiornation related to amendment(s).						
9.3	Have any provisions of the code of ethics been waived for any of the specified of	ficers?				Yes [ ]	No [X]
9.31	If the response to 9.3 is Yes, provide the nature of any waiver(s).						
		ANCI					
10.1	Does the reporting entity report any amounts due from parent, subsidiaries or affi	liates on	Page 2 of this statement?			Yes [X]	No [ ]
10.2	If yes, indicate any amounts receivable from parent included in the Page 2 amounts	nt:			\$	2,00	00,000
	INVE	STM	ENT				
11.1	Were any of the stocks, bonds, or other assets of the reporting entity loaned, plac for use by another person? (Exclude securities under securities lending agreeme					Yes [ ]	No [X]
11.2	If yes, give full and complete information relating thereto:						
12.	Amount of real estate and mortgages held in other invested assets in Schedule B						
13.	Amount of real estate and mortgages held in short-term investments:				\$		
14.1	Does the reporting entity have any investments in parent, subsidiaries and affilia	ites?				Yes [ ]	No [X]
14.2	If yes, please complete the following:						
	ALON POLICE		1 Prior Year-End Book/Adjusted Carrying Value	•	2 Current Quarter Book/Adjusted Carrying Value		
	14.21 Bonds						
	14.23 Common Stock	\$.		\$			
	14.24 Short-Term Investments						
	14.25 Mortgage Loans on Real Estate						
	14.27 Total Investment in Parent, Subsidiaries and Affiliates						
	(Subtotal Lines 14.21 to 14.26)14.28 Total Investment in Parent included in Lines 14.21 to 14.26	\$.	0	\$	0		
	above	\$.		\$			
15.1	Has the reporting entity entered into any hedging transactions reported on Sched	ule DB?				Yes [ ]	No [X]
15.2	If yes, has a comprehensive description of the hedging program been made avail	able to th	e domiciliary state?			Yes [ ]	No [ ]

If no, attach a description with this statement.

# GENERAL INTERROGATORIES

16	For the reporting entity's security lending pro- 16.1 Total fair value of reinvested collatera 16.2 Total book adjusted/carrying value of 16.3 Total payable for securities lending re-	al assets reported reinvested colla	d on Schedule D teral assets repo	L, Parts 1 and 2		\$ \$		
17.	Excluding items in Schedule E – Part 3 – Speentity's offices, vaults or safety deposit boxes pursuant to a custodial agreement with a qua Considerations, F. Outsourcing of Critical Ful Handbook?	, were all stocks lified bank or tru nctions, Custodia	, bonds and othe st company in ac al or Safekeeping	er securities, owner scordance with Se g Agreements of t	ed throughout the current year held ection 1, III – General Examination he NAIC <i>Financial Condition Examiner</i>	rs	s [X]	No [ ]
17.1	For all agreements that comply with the requi	rements of the N	IAIC Financial C	ondition Examine	ers Handbook, complete the following:			
	110. 5. 1	1 e of Custodian(s	5)	P0 Box 1800,	Custodian Address St . Paul , MN 55101			
17.2	For all agreements that do not comply with th location and a complete explanation:	e requirements o	of the NAIC Fina	ncial Condition E.	xaminers Handbook, provide the name	,		
	1 Name(s)		2 Location	(s)	3 Complete Explanation(s)			
	Have there been any changes, including name		e custodian(s) id	dentified in 17.1 d	uring the current quarter?	Yes	s [ ]	No [X]
17.4	If yes, give full and complete information rela	ling thereto:						
	1 Old Custodian	New (	2 Custodian	3 Date of Chang	ge Reason			
17.5	Identify all investment advisors, broker/deale accounts, handle securities and have authori			f of the reporting 6	entity:			
	Central Registr	1 ation Depository	Na	2 ame(s)	3 Address			
	Have all the filing requirements of the <i>Purpos</i> If no, list exceptions:	es and Procedu	res Manual of the	e NAIC Investmer	nt Analysis Office been followed?	Ү	es [X]	No [ ]

## **GENERAL INTERROGATORIES**

### PART 2 - HEALTH

Operating Percentages:	
1.1 A&H loss percent	90.6 %
1.2 A&H cost containment percent	0.0 %
1.3 A&H expense percent excluding cost containment expenses.	90.6 %
2.1 Do you act as a custodian for health savings accounts?	Yes [ ] No [X]
2.2 If yes, please provide the amount of custodial funds held as of the reporting date	\$
2.3 Do you act as an administrator for health savings accounts?	Yes [ ] No [X]
2.4 If yes, please provide the balance of the funds administered as of the reporting date	\$

## **SCHEDULE S - CEDED REINSURANCE**

	1 2	2	Showing All New Reinsurance Tre	5	1 6	1 7	1 0	_
1 NAIC Company Code	2	3 Effective	4	5 Domiciliary Jurisdiction	6 Type of Reinsurance	7	8 Certified Reinsurer Rating (1 through 6)	9 Effective Date of Certified
Company Code	ID Number	Date	Name of Reinsurer	Jurisdiction	Ceded	Type of Reinsurer	(1 through 6)	Reinsurer Rating
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### SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

Direct Business Only 3 4 Federal 8 9 6 Employees Health Life & Annuity Property/ Casualty Accident & Benefits Total Active Medicare Medicaid Columns Deposit-Type Program Other Premiums States. Etc 2 Through 7 Status Title XVIII Title XIX Premiums Consideration Premiums Contracts 1. Alabama ΑL Ν 0 2. Alaska ΑK Ν 0 3. Arizona ΑZ N. .0 .0 4. Arkansas AR .N. 0 5. California CA Ν 6. Colorado СО N .0 СТ N. 0 7. Connecticut DE . N. .0 8. Delaware DC N 0 9. Dist. Columbia 10. Florida FL Ν 0 11. GΑ Ν 0 12. Hawaii . н ID .0 .N. 13. Idaho 0 14. Illinois IL N 15. Indiana INI N 0 16. ΙA N. .0 17. Kansas KS .N. .0 ΚY .N. 18. Kentucky 19. Louisiana LA N 0 20. Maine ME Ν 0 21. Maryland MD N. 0. .N. MA .0 22. Massachusetts .. .9,997,182 .2.867.278 12.864.460 MI 23. Michigan L 24. Minnesota MN Ν 0 25. Mississippi MS Ν 0 N. .0 26. Missouri .. МО 27. Montana. МТ .N. .0 28 Nebraska NF Ν 0 29. Nevada .. NV Ν 0 NH N 0 30. New Hampshire N. 0. 31. New Jersey . NJ .0 32. New Mexico NM .N. 33 New York NY Ν 0 34. North Carolina NC Ν 0 ND Ν 0 35. North Dakota ... 36. Ohio.. ОН .N. 0. OK Ν 0 Oklahoma 38. Oregon . OR Ν 0 39. Pennsylvania РΑ N 0 .N. 0 40. Rhode Island RI SC .N. .0 41. South Carolina 42. South Dakota SD Ν 0 43. Tennessee .... ΤN Ν 0 44. ΤX Ν 0 Texas 45. Utah ... UT .N. .0 .N. 46. Vermont VT 47. Virginia. VA Ν 0 48. Washington ..... WA N Λ 49. WV Ν 0 West Virginia ... 50. Wisconsin ..... WI .N. .0 .N. 51. Wyoming. WY 52. American Samoa .. AS N n 53. Guam . GU N Λ PR 0 54. Puerto Rico ... N. 0. .N. 55. U.S. Virgin Islands ..... .VI 56. Northern Mariana Islands ...... .N. .0 MP 57. Canada CAN N 0 XXX 0 0 .0 0 .0 0 58. Aggregate other alien .....OT ХХХ .0 .9,997,182 .2,867,278 .0 12,864,460 59. Subtotal.. 0 ..0 60. Reporting entity contributions for Employee Benefit Plans... XXX 0 Total (Direct Business) 9,997,182 2,867,278 0 0 12,864,460 0 DETAILS OF WRITE-INS 58001 XXX. .0 58002 XXX 0 58003 XXX .0 58998 Summary of remaining write-ins for XXX 0 .0 0 0 .0 0 .0 0 Line 58 from overflow page... 58999 Totals (Lines 58001 through 58003

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

(a) Insert the number of L responses except for Canada and other Alien.

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XXX

plus 58998) (Line 58 above)

Centene	Corporation	42-1406317	DE	
	nkers Reserve Life Insurance Company of Wisconsin	39-0993433	WI	71013
	Health Plan Real Estate Holding, Inc	46-2860967	MO	
Pe	ach State Health Plan, Inc	20-3174593	GA	12315
. •	Health Plan Real Estate Holding, Inc	46-2860967	MO	0.0
lov	va Total Care, Inc	46-4829006	IA	15713
	ckeye Community Health Plan, Inc	32-0045282	OH	11834
	Health Plan Real Estate Holding, Inc	46-2860967	MO	
Ab	solute Total Care, Inc	20-5693998	SC	12959
,	Health Plan Real Estate Holding, Inc	46-2860967	MO	
	Physicians Choice, LLC	59-3807546	SC	
	PhyTrust of South Carolina LLC	65-1206841	FL	
Co	ordinated Care Corporation d/b/a Managed Health Services	39-1821211	IN	95831
	Health Plan Real Estate Holding, Inc	46-2860967	MO	
He	althy Washington Holdings, Inc	46-5523218	DE	
	Coordinated Care of Washington, Inc	46-2578279	WA	15352
Ма	anaged Health Services Insurance Corp	39-1678579	WI	96822
	Health Plan Real Estate Holding, Inc	46-2860967	MO	
На	Ilmark Life Insurance Co	86-0819817	AZ	60078
Su	perior HealthPlan, Inc	74-2770542	TX	95647
	Health Plan Real Estate Holding, Inc	46-2860967	MO	
He	althy Louisiana Holdings LLC	27-0916294	DE	
	Louisiana Healthcare Connections, Inc	27-1287287	LA	13970
Ма	agnolia Health Plan Inc	20-8570212	MS	13923
Illir	niCare Health Plan, Inc	27-2186150	IL	14053
	Health Plan Real Estate Holding, Inc	46-2860967	MO	
Su	nshine Health Holding LLC	26-0557093	FL	
	Sunshine State Health Plan, Inc	20-8937577	FL	13148
	Access Health Solutions LLC	56-2384404	FL	
	Sunshine Consulting Services, Inc.	27-0242132	DE	
Ke	ntucky Spirit Health Plan, Inc	45-1294925	KY	14100
He	althy Missouri Holding, Inc	45-5070230	MO	
	Home State Health Plan, Inc	45-2798041	MO	14218
	Health Plan Real Estate Holding, Inc	46-2860967	MO	
Su	nflower State Health Plan, Inc	45-3276702	KS	14345
Gra	anite State Health Plan, Inc	45-4792498	NH	14226
Bri	dgeway Advantage Solutions, Inc	46-4195563	AZ	15447
Ca	lifornia Health and Wellness Plan	46-0907261	CA	
Fid	delis SecureCare of Michigan, Inc.	30-0312489	MI	10769
Ag	ate Resources, Inc.	20-0483299	OR	
	Lane Individual Practice Association, Inc.	93-1198219	OR	

Trillium Community Health Plan, Inc.	42-1694349	OR	12559
Trillium Community Health Plan, Inc.	42-1694349	OR	12559
Agate Properties, LLC	26-4475075	OR	
Independent Professional Services, LLC	93-1198376	OR	
Nebraska Total Care, Inc.	47-5123293	NE	15902
Pennsylvania Health & Wellness, Inc.	47-5340613	PA	
Superior HealthPlan Community Solutions, Inc.	47-5664832	TX	15912
Sunshine Health Community Solutions, Inc.	47-5667095	FL	15927
Arkansas Health and Wellness Inc.	81-1282251	AR	
Centene Management Company LLC	39-1864073	WI	
CMC Real Estate Co. LLC	20-0057283	DE	
Centene Center LLC	26-4094682	DE	
Centene Center II, LLC	47-5156015	DE	
CMC Hanley, LLC	46-4234827	MO	
Forhan, LLC	47-2914561	MO	
Hanley-Forsyth, LLC	37-1766939	MO	
GPT Acquisition LLC	45-5431787	DE	
Clayton Property Investment LLC	45-4372065	DE	
LSM Holdco, Inc.	46-2794037	DE	
Lifeshare Management Group, LLC	46-2798132	NH	
CCTX Holdings, LLC	20-2074217	DE	
Centene Company of Texas, LP	74-2810404	TX	
Centene Holdings, LLC	20-2074277	DE	
Centene Company of Texas, LP	74-2810404	TX	
MHS Travel & Charter, Inc	43-1795436	WI	
LiveHealthier, Inc.	47-2516714	DE	
Envolve, Inc.	37-1788565	DE	
AHA Administrative Services, LLC	n/a	AL	
Centene Health Systems Group of New York	47-3454898	NY	
Health Care Enterprises, LLC	46-4855483	DE	
CenCorp Health Solutions, Inc	22-3889471	DE	
Cenphiny Mgmt, LLC	42-1565805	DE	
NurseWise Holdings LLC	42-1565807	DE	
NurseWise LP	52-2379566	DE	
Nurse Response, Inc	20-4730372	DE	
Bridgeway Health Solutions, LLC	20-4980875	DE	
Bridgeway Health Solutions of Arizona Inc.	20-4980818	AZ	
Nurtur Health, Inc	06-1476380	DE	
Family Care & Workforce Diversity Consultants LLC d/b/a Worklife	00 147 0000	DL	
Innovations	06-1404277	CT	
Wellness By Choice, LLC	16-1686991	NY	

Cenpatico Behavioral Health, LLC	68-0461584	CA	
CBHSP Arizona, Inc	86-0782736	ΑZ	
Cenpatico of California, Inc	47-2595704	CA	
Integrated Mental Health Mgmt, LLC	74-2892993	TX	
Integrated Mental Health Services	74-2785494	TX	
Cenpatico Behavioral Health of Arizona, LLC	20-1624120	ΑZ	
Cenpatico of Arizona Inc.	80-0879942	ΑZ	14704
Envolve Benefit Options, Inc.	20-4730341	DE	
Envolve Captive Insurance Company, Inc.	36-4520004	SC	
AECC Total Vision Health Plan of Texas, Inc	75-2592153	TX	95302
Envolve Vision, Inc	20-4773088	DE	
Envolve Vision of Florida, Inc	65-0094759	FL	
Envolve Total Vision, Inc.	20-4861241	DE	
Envolve Vision of New York, Inc.	06-1635519	NY	
Dental Health & Wellness, Inc	46-2783884	DE	
Cenpatico of Louisiana, Inc.	45-2303998	LA	15357
Celtic Group, Inc	36-2979209	DE	
Celtic Insurance Company	06-0641618	IL	80799
Ambetter of Magnolia Inc	35-2525384	MS	15762
Ambetter of Peach State Inc.	36-4802632	GA	15729
Novasys Health, Inc	27-2221367	DE	
CeltiCare Health Plan Holdings LLC	26-4278205	DE	
CeltiCare Health Plan of Massachusetts, Inc.	26-4818440	MA	13632
US Script, Inc	77-0578529	DE	
LBB Industries, Inc	76-0511700	TX	
RX Direct, Inc	75-2612875	TX	
US Script IPA, LLC	46-2307356	NY	
Casenet LLC	90-0636938	DE	
Casenet S.R.O.	Foreign	CZE	
Centurion Group, Inc	61-1450727	DE	
Centurion LLC	90-0766502	DE	
Centurion of Virginia, LLC	47-1577742	VA	
Centurion of Vermont, LLC	47-1686283	VT	
Centurion of Mississippi, LLC	47-2967381	MS	
Centurion of Tennessee, LLC	30-0752651	TN	
Massachusetts Partnership for Correctional Healthcare, LLC	61-1696004	MA	
Centurion of Idaho, LLC	46-3590120	ID	
Centurion of Michigan, LLC	46-1041008	MI	
Centurion of Minnesota, LLC	46-2717814	MN	
Centurion Correctional Healthcare of New Mexico, LLC	81-1161492	NM	
Centurion of Florida, LLC	81-0687470	FL	

Occident Theorem to Occident to 110	07.0047700	DE
Specialty Therapeutic Care Holdings, LLC	27-3617766	DE
Specialty Therapeutic Care, LP	73-1698808	TX
Specialty Therapeutic Care, GP, LLC	73-1698807	TX
Specialty Therapeutic Care, LP	73-1698808	TX
Specialty Therapeutic Care West, LLC	26-2624521	TX
AcariaHealth Solutions, Inc.	80-0856383	DE
AcariaHealth, Inc.	45-2780334	DE
AcariaHealth Pharmacy #14, Inc	27-1599047	CA
AcariaHealth Pharmacy #11, Inc	20-8192615	TX
AcariaHealth Pharmacy #12, Inc	27-2765424	NY
AcariaHealth Pharmacy #13, Inc	26-0226900	CA
AcariaHealth Pharmacy, Inc	13-4262384	CA
HomeScripts.com, LLC	27-3707698	MI
New York Rx, Inc.	20-8235695	NY
U.S. Medical Management Holdings, Inc	27-0275614	DE
U.S. Medical Management, LLC	38-3153946	DE
U.S. Medical Management, LLC	38-3153946	DE
RMED, LLC	31-1733889	FL
IAH of Florida, LLC	47-2138680	FL
Heritage Home Hospice, LLC	51-0581762	MI
Grace Hospice of Austin, LLC	20-2827613	MI
ComfortBrook Hospice, LLC	20-1530070	ОН
Comfort Hospice of Texas, LLC	20-4996551	MI
Grace Hospice of San Antonio, LLC	20-2827526	MI
Grace Hospice of Grand Rapids, LLC	45-0679248	MI
Grace Hospice of Indiana, LLC	45-0634905	MI
Grace Hospice of Virginia, LLC	45-5080637	MI
Comfort Hospice of Missouri, LLC	45-5080567	MI
Grace Hospice of Colorado, LLC	45-5080675	MI
Grace Hospice of Wisconsin, LLC	46-1708834	MI
Seniorcorps Pensinsula, LLC	26-4435532	VA
R&C Healthcare, LLC	33-1179031	TX
A N J, LLC	20-0927034	TX
Pinnacle Senior Care of Missouri, LLC	46-0861469	MI
Country Style Health Care, LLC	03-0556422	TX
Phoenix Home Health Care, LLC	14-1878333	DE
Traditional Home Health Services, LLC	75-2635025	TX
Family Nurse Care, LLC	38-2751108	MI
Family Nurse Care II, LLC	20-5108540	MI
Family Nurse Care of Ohio, LLC	20-3920947	MI
Pinnacle Senior Care of Wisconsin, LLC	46-4229858	WI
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	Pinnacle Senior Care of Indiana, LLC		81-1565426	MI	
	Pinnacle Home Care, LLC		76-0713516	TX	
	North Florida Health Services, Inc		59-3519060	FL	
	Pinnacle Sr. Care of Kalamazoo, LLC		47-1742728	MI	
	Hospice DME Company, LLC		46-1734288	MI	
	Rapid Respiratory Services, LLC		20-4364776	DE	
	USMM Accountable Care Network, LLC		46-5730959	DE	
	USMM Accountable Care Partners, LLC		46-5735993	DE	
	USMM Accountable Care Solutions, LLC		46-5745748	DE	
	USMM ACO, LLC		45-4165480	MI	
	USMM ACO Florida, LLC		45-4157180	MI	
	USMM ACO North Texas, LLC		45-4154905	MI	
Healt	h Net, Inc.		47-5208076	DE	
	Health Net of California, Inc.		95-4402957	CA	
	Health Net Life Insurance Compa	ny	73-0654885	CA	66141
	Health Net Life Reinsurance Com	pany	98-0409907	CYM	
	Health Net of California Real Esta	ate Holdings, Inc.	54-2174069	CA	
	Managed Health Network, Inc.		95-4117722	DE	
	Catalina Behavioral Health Service	es, Inc.	51-0490598	AZ	
	Managed Health Network		95-3817988	CA	
	MHN Services		95-4146179	CA	
	MHN Services IPA, Inc	s.	13-4027559	NY	
	MHN Government Serv	vices, Inc.	42-1680916	DE	
	MHN Global S	Services, Inc.	51-0589404	DE	
	MHN Govern	ment Services-Belgium, Inc.	80-0852000	DE	
	MHN Govern	ment Services-Djibouti, Inc.	90-0889816	DE	
		ment Services-Germany, Inc.	80-0852008	DE	
	MHN Govern	ment Services-Guam, Inc.	90-0889803	DE	
	MHN Govern	ment Services-International, Inc.	90-0889825	DE	
	MHN Govern	ment Services-Italy, Inc.	80-0852019	DE	
		ment Services-Japan, Inc.	46-1038058	DE	
		ment Services-Puerto Rico, Inc.	90-0889815	DE	
		ment Services-Turkey, Inc.	90-0889824	DE	
		ment Services-United Kingdom, Inc.	90-0889833	DE	
	Network Prov	=	88-0357895	DE	
	Health Net Federal Services, LLC		68-0214809	DE	
	Health Net Preferred Providers, L	LC	61-1388903	DE	
	Health Net Veterans, LLC		35-2490375	DE	
	Network Providers, LLC		88-0357895	DE	
	Health Net of the Northeast, LLC		06-1116976	DE	
	Health Net of the Northeast, LLC		06-1116976	DE	
	•				

QualMed, Inc.	84-1175468	DE	
QualMed Plans for Health of Colorado, Inc.	84-0975985	CO	
Health Net Health Plan of Oregon, Inc.	93-1004034	OR	95800
HSI Advantage Health Holdings, Inc.	23-2867299	DE	
QualMed Plans for Health of Western Pennsylvania, Inc.	23-2867300	PA	
Pennsylvania Health Care Plan, Inc.	25-1516632	PA	
Health Net Services Inc.	94-3037822	DE	
Health Net Community Solutions of Arizona, Inc.	81-1348826	ΑZ	15895
Health Net Community Solutions, Inc.	54-2174068	CA	
Health Net of Arizona, Inc.	36-3097810	ΑZ	95206
Health Net One Payment Services, Inc.	54-2153100	DE	
Health Net of Pennsylvania, LLC	n/a	PA	
QualMed Plans for Health of Pennsylvania, Inc.	23-2456130	PA	
FH Surgery Limited, Inc.	68-0390434	CA	
Foundation Health Facilities, Inc.	68-0390438	CA	
FH Assurance Company	98-0150604	CYM	
Health Net Pharmaceutical Services	68-0295375	CA	
Health Net of Arizona Administrative Services, Inc.	86-0660443	ΑZ	
National Pharmacy Services Inc.	84-1301249	DE	
Integrated Pharmacy Systems, Inc.	23-2789453	PA	
FH Surgery Centers Inc.	68-0390435	CA	
Greater Sacramento Surgery Center LP	68-0343818	CA	
Health Net Access, Inc.	46-2616037	ΑZ	
MHS Consulting, International, Inc	20-8630006	DE	
PRIMEROSALUD, S.L.	Foreign	ESP	
Centene UK Limited	Foreign	GBR	
The Practice Plc	Foreign	GBR	

### 16

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
						Name of					Type of Control			
						Securities Exchange if					(Ownership, Board.	If Control is	Ultimate	
		NAIC				Publicly	Name of		Relationship to		Management,	Ownership	Controlling	
Group		Company	l ID	Federal		Traded (U.S. or	Parent Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Entity(ies)/	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Person(s)	*
						New York Stock			,	Shareholders/Board of	Shareholders/Boa		Shareholders/Boa	
01295	Centene Corporation	00000	42-1406317		0001071739	Exchange	Centene Corporation	DE	UDP	Directors	rd of Directors	100.0	rd of Directors	0
	L			1			Bankers Reserve Life Insurance				l		Centene	_
01295	Centene Corporation	71013	. 39-0993433	-			Company of Wisconsin	WI	IA	Centene Corporation	Ownership	100.0	Corporation	0
				1			Health Plan Real Estate			Bankers Reserve Life			Cambana	
01295	Centene Corporation	00000	46-2860967	1			Holding, Inc	MO	NIA	Insurance Company of Wisconsin	Ownership	17.0	Centene Corporation	
01295	l centene corporation	00000	. 40-2000907	1				IWIU		W1500H51H	Ownersinp	17 .0	Centene	
01295	Centene Corporation	12315	20-3174593	1			Peach State Health Plan. Inc	GA	IA	Centene Corporation	Ownership	100 0	Corporation	0
0.200							Health Plan Real Estate						Centene	
01295	Centene Corporation	00000	46-2860967				Holding, Inc	MO	NIA	Peach State Health Plan, Inc	Ownership	21.0	Corporation	0
	· ·			1									Centene	
01295	Centene Corporation	15713	. 46-4829006				lowa Total Care, Inc	I A	IA	Centene Corporation	Ownership	100.0	Corporation	0
0.4005		44004	00 0045000				Buckeye Community Health Plan,	011				400.0	Centene	
01295	Centene Corporation	11834	. 32-0045282				Inc Health Plan Real Estate	OH	IA	Centene Corporation Buckeye Community Health	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	46-2860967	1			Holding, Inc	MO	N1A	Plan. Inc.	Ownership	13.0	Centene Corporation	
01293	Certiene corporation	00000		-			[	IWIO		Fran, 1110	Owner Sirrp	13.0	Centene	0
01295	Centene Corporation	12959	20-5693998	1			Absolute Total Care. Inc	SC	IA	Centene Corporation	Ownership	100.0	Corporation	0
01200		12000	20 0000000				Health Plan Real Estate			Contone Corporation	0 11101 0111 p		Centene	
01295	Centene Corporation	00000	46-2860967				Holding, Inc.	MO	NIA	Absolute Total Care, Inc	Ownership	1.0	Corporation	0
	'			i i							· '		Centene	
01295	Centene Corporation	00000	. 59 - 3807546				Physicians Choice, LLC	SC	NIA	Absolute Total Care, Inc	Ownership	100.0	Corporation	0
0.4005		00000	05 4000044									400.0	Centene	
01295	Centene Corporation	00000	65-1206841				PhyTrust of South Carolina LLC	FL	NIA	Absolute Total Care, Inc	Ownership	100.0	Corporation	0
01295	Centene Corporation	95831	39-1821211				Coordinated Care Corporation d/b/a Managed Health Services	IN	IA	Centene Corporation	Ownership	100.0	Centene Corporation	
01295		95051	. 102 12 1 1	1			Health Plan Real Estate			Coordinated Care Corporation	. Owner sirrp	100.0	Centene	
01295	Centene Corporation	00000	46-2860967				Holding, Inc	MO	NIA	d/b/a Managed Health Services	Ownership	15.0	Corporation	0
0.200							Healthy Washington Holdings,			1			Centene	
01295	Centene Corporation	00000	. 46 - 5523218				Inc	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	0
				1			Coordinated Care of Washington,			Healthy Washington Holdings,			Centene	
01295	Centene Corporation	15352	. 46-2578279				Inc	WA	IA	Inc	Ownership	100.0	Corporation	0
04005	0	00000	00 4070570	1			Managed Health Services	W.	1.4	0	O	400.0	Centene	
01295	Centene Corporation	96822	. 39 - 1678579	-			Insurance Corp Health Plan Real Estate	WI	I A	Centene Corporation Managed Health Services	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	46-2860967	1			Holding, Inc	MO	NIA	Insurance Corp	Ownership	2.0	Centene Corporation	
01233	Licentene corporation	00000							NIA	Trisurance corp	1 O#1161 3111 P	2.0	Centene	
01295	Centene Corporation	60078	86-0819817				Hallmark Life Insurance Co	AZ	IA	Centene Corporation	Ownership	100.0	Corporation	0
													Centene	
01295	Centene Corporation	95647	74-2770542				Superior HealthPlan, Inc	TX	IA	Centene Corporation	Ownership	100.0	Corporation	0
		1					Health Plan Real Estate						Centene	
01295	Centene Corporation	00000	. 46-2860967	-[			Holding, Inc	MO	NIA	Superior HealthPlan, Inc	Ownership	21.0	Corporation	0
04205	Contone Corneration	00000	27-0916294				Healthy Louisians Heldinss H.O.	DE	NI A	Contono Cornoratias	Ownersh:-	100.0	Centene	
01295	Centene Corporation	00000		-			Healthy Louisiana Holdings LLC Louisiana Healthcare	UE	NIA	Centene Corporation Healthy Louisiana Holdings	Ownership	100.0	Corporation Centene	<sup>U</sup>
01295	Centene Corporation	13970	27 - 1287287				Connections, Inc	LA	IA	LLC	Ownership	100 0	Corporation	
0 1200	. Journal of poral ron	10010					100111100110110, 1110	L		LLV	o "1101 3111 p	1	001 por at 1011	∪

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1	2	3	4	5	6	7 Name of	8	9	10	11	12 Type of Control	13	14	15
						Securities					(Ownership,			
						Exchange if					Board,	If Control is	Ultimate	
Group		NAIC Company	ID	Federal		Publicly Traded (U.S. or	Name of Parent Subsidiaries	Domiciliary	Relationship to Reporting	Directly Controlled by	Management, Attorney-in-Fact,	Ownership Provide	Controlling	
Code	Group Name	Company	Number	RSSD	CIK	Traded (U.S. or International)	or Affiliates	Location	Entity	Directly Controlled by (Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/ Person(s)	*
					-	, , , , ,					,	Ĭ	Centene	
01295	Centene Corporation	13923	20-8570212				Magnolia Health Plan Inc	MS	IA	Centene Corporation	Ownership	100.0	Corporation	0
01295	Centene Corporation	14053	27 - 2186150				 		IA	Centene Corporation	Ownership	100.0	Centene Corporation	
01233	Centene Corporation	14000		1			Health Plan Real Estate			Centene corporation	. Owner sirrp	100.0	Centene	
01295	Centene Corporation	00000	46-2860967				Holding, Inc	MO	NIA	IlliniCare Health Plan, Inc	Ownership	5.0	Corporation	0
04005	0	00000	00 0557000				Overala in a Haralda Haldi ee H.O.	FI	NII A	0	O	400.0	Centene	
01295	Centene Corporation	00000	26-0557093				Sunshine Health Holding LLC		NIA	Centene Corporation	Ownership	100.0	Corporation Centene	
01295	Centene Corporation	13148	20-8937577				Sunshine State Health Plan, Inc.	FL	IA	Sunshine Health Holding LLC	Ownership	100.0	Corporation	0
	·						,						Centene	
01295	Centene Corporation	00000	56-2384404				Access Health Solutions LLC	FL	NIA	Sunshine Health Holding LLC	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	27 - 0242132				Sunshine Consulting Services,	DE	NIA	Sunshine Health Holding LLC	Ownership.	100.0	Centene Corporation	0
0 1200							Kentucky Spirit Health Plan,			denomina floar the florating 220			Centene	
01295	Centene Corporation	14100	45 - 1294925				Inc	KY	IA	Centene Corporation	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	45-5070230				Healthy Missouri Holding, Inc	MO	NIA	Centene Corporation	Ownership	05.0	Centene Corporation	
01295	Centene corporation	00000					Theatthy wissouth hording, inc	IWIU		Centene corporation	. Owner Sirip		Centene	
01295	Centene Corporation	14218	45-2798041				Home State Health Plan, Inc	MO	IA	Healthy Missouri Holding, Inc	Ownership	100.0	Corporation	0
04005	0	00000	40,0000007				Health Plan Real Estate	l MO	NII A	Harra Otata Harlib Blass I.a.	A		Centene	
01295	Centene Corporation	00000	. 46-2860967				Holding, IncSunflower State Health Plan,		NIA	Home State Health Plan, Inc	Ownership	5.0	Corporation Centene	0
01295	Centene Corporation	14345	45-3276702	]			Inc	KS.	I A.	Centene Corporation	Ownership	100.0	Corporation	0
	· ·										l'		Centene	
01295	Centene Corporation	14226	45-4792498	·			Granite State Health Plan, Inc	NH	IA	Centene Corporation	Ownership	100.0	Corporation	0
01295	Centene Corporation	15447	46-4195563				Bridgeway Advantage Solutions,	A7	IA	Centene Corporation	Ownership	100 0	Centene Corporation	0
0.1200	Contone Conpension of the Contone Co						California Health and Wellness						Centene	
01295	Centene Corporation	00000	46-0907261				Plan	CA	NIA	Centene Corporation	Ownership	100.0	Corporation	0
01295	Centene Corporation	10769	30-0312489				Fidelis SecureCare of Michigan,	l MI	RE	Centene Corporation	Ownership	100.0	Centene Corporation	0
01230	Tochtone corporation	107 03					The .		NL	deritario corporation	. O will Gi Si Tip		Centene	
01295	Centene Corporation	00000	20-0483299				Agate Resources, Inc.	OR	NIA	Centene Corporation	Ownership	100.0	Corporation	0
04205	Contona Corneration	00000	93-1198219				Lane Individual Practice	OR	NIA	Agate Resources. Inc	Ownership	100.0	Centene Corporation	
01295	Centene Corporation	00000	. 93 - 1 1902 19	1			Association, Inc Trillium Community Health Plan,	UK		Lane Individual Practice	. ownership	100.0	Centene	
01295	Centene Corporation	12559	42 - 1694349				Inc.	OR	IA	Association, Inc.	Ownership	60.0	Corporation	0
0.4005		40550	40. 400.40.40				Trillium Community Health Plan,	0.0					Centene	
01295	Centene Corporation	12559	42-1694349				Inc	0R	IA	Agate Resources, Inc	Ownership	40.0	Corporation Centene	0
01295	Centene Corporation	00000	26-4475075	]			Agate Properties. LLC	OR	NIA	Agate Resources, Inc	Ownership	100.0	Corporation	0
	·						Independent Professional				· '		Centene	
01295	Centene Corporation	00000	93-1198376				Services, LLC	0R	NIA	Agate Resources, Inc	Ownership	100.0	Corporation	0
01295	Centene Corporation	15902	47 - 5123293				Nebraska Total Care, Inc	NE.	IA	Centene Corporation	Ownership	100 0	Centene Corporation	n
İ	İ '						Pennsylvania Health & Wellness,			'	· '		Centene	
01295	Centene Corporation	00000	47 - 5340613	[			Inc.	PA	NIA	Centene Corporation	Ownership	100.0	Corporation	0

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1	2	3	4	5	6	Name of	8	9	10	11	12 Type of Control	13	14	15
						Securities					(Ownership,	If Control in	l Iltimata	
		NAIC				Exchange if Publicly	Name of		Relationship to		Board, Management,	If Control is Ownership	Ultimate Controlling	
Group	O and a Mariana	Company	ID	Federal	0114	Traded (U.S. or	Parent Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Entity(ies)/	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates Superior HealthPlan Community	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Person(s) Centene	*
01295	Centene Corporation	15912	47 - 5664832				Solutions, Inc.	TX	IA	Centene Corporation	Ownership	100.0	Corporation	0
01295	Centene Corporation	15927	47 - 5667095				Sunshine Health Community Solutions, Inc	FL	I A	Centene Corporation	Ownership	100.0	Centene Corporation	
	·	İ		1			Arkansas Health and Wellness			,	,		Centene	
01295	Centene Corporation	. 00000	81 - 1282251				Inc	AR	NIA	Centene Corporation	Ownership	100.0	Corporation Centene	0
01295	Centene Corporation	. 00000	39-1864073				Centene Management Company LLC	WI	NIA	Centene Corporation	Ownership	100.0	Corporation	0
01295	Centene Corporation	. 00000	20-0057283				CMC Real Estate Co. LLC	DE	NIA	Centene Management Company	Ownership	100.0	Centene Corporation	
01293	Toeriterie corporation	. 00000					Come Real Estate Co. ELC		NTA	==	. Owner Sirrp	100.0	Centene	
01295	Centene Corporation	. 00000	. 26-4094682				Centene Center LLC	DE	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Corporation	0
01295	Centene Corporation	. 00000	47 - 5156015				Centene Center II, LLC	DE	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Centene Corporation	0
04005	·	00000	40 400 4007				CMC Hamley 11.0	MO	NIA	CMC Paul Fatata Ca IIIC		400.0	Centene	
01295	Centene Corporation	. 00000	. 46-4234827				CMC Hanley, LLC		NIA	CMC Real Estate Co. LLC	Ownership	100.0	Corporation Centene	
01295	Centene Corporation	. 00000	47 - 2914561				Forhan, LLC	MO	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Corporation	0
01295	Centene Corporation	. 00000	37 - 1766939				Hanley-Forsyth, LLC	MO	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Centene Corporation	
	·	İ	45 5404707					DE.			İ '		Centene	
01295	Centene Corporation	. 00000	. 45-5431787	1			GPT Acquisition LLC	DE	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Corporation Centene	
01295	Centene Corporation	. 00000	45-4372065				Clayton Property Investment LLC	DE	NIA	GPT Acquisition LLC	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	46-2794037				LSM Holdco, Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	
	'									·	·		Centene	
01295	Centene Corporation	. 00000	. 46-2798132				Lifeshare Management Group, LLC	NH	NIA	LSM Holdco, Inc	Ownership	100.0	Corporation Centene	
01295	Centene Corporation	. 00000	. 20-2074217				CCTX Holdings, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	74-2810404				Centene Company of Texas, LP	ТХ	NIA	CCTX Holdings, LLC	Ownership.	1.0	Centene Corporation	0
	,									<i>y</i>	,		Centene	
01295	Centene Corporation	. 00000	20-2074277	-			Centene Holdings, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Corporation Centene	
01295	Centene Corporation	. 00000	. 74-2810404				Centene Company of Texas, LP	ТХ	NIA	Centene Holdings, LLC	Ownership	99.0	Corporation	0
01295	Centene Corporation	00000	43-1795436				MHS Travel & Charter, Inc	l wı	NIA	Centene Corporation.	Ownership	100 0	Centene Corporation	
	'	İ								'	· '		Centene	
01295	Centene Corporation	. 00000	47 - 2516714				LiveHealthier, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Corporation Centene	[
01295	Centene Corporation	. 00000	. 37 - 1788565				Envolve, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	0
01295	Centene Corporation	. 00000					AHA Administrative Services,	AL	NIA	Envolve, Inc.	Ownership	100 0	Centene Corporation	
	·		-				Centene Health Systems Group of			,	İ '		Centene	
01295	Centene Corporation	. 00000	47 - 3454898				New York	NY	NIA	Centene Corporation	Ownership	100.0	Corporation Centene	
01295	Centene Corporation	. 00000	46-4855483				Health Care Enterprises, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	0

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						Securities					(Ownership,			
						Exchange if					Board,	If Control is	Ultimate	
Group		NAIC Company	ID	Federal		Publicly Traded (U.S. or	Name of Parent Subsidiaries	Domiciliary	Relationship to Reporting	Directly Controlled by	Management, Attorney-in-Fact,	Ownership Provide	Controlling Entity(ies)/	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Person(s)	*
04005		00000	00 0000474					DE.				400.0	Centene	
01295	Centene Corporation	00000	22-3889471				CenCorp Health Solutions, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Corporation Centene	.[
01295	Centene Corporation	00000	42 - 1565805				Cenphiny Mgmt, LLC	DE	NIA	CenCorp Health Solutions, Inc	Ownership	100.0	Corporation	0
04005	Contant Constant in	00000	42 - 1565807				Number 11 diament C		NII A	CarCara Haalth Calutiana Ina	O	400.0	Centene	
01295	Centene Corporation	00000	. 42 - 1000807				NurseWise Holdings LLC	DE	NIA	CenCorp Health Solutions, Inc	Townership	100.0	Corporation Centene	
01295	Centene Corporation	00000	52-2379566				NurseWise LP	DE	NIA	NurseWise Holdings LLC	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	20-4730372				Nurse Response, Inc.	DE	NIA	  NurseWise LP	Ownership	100.0	Centene Corporation	
01295	Centene corporation						Natise Response, The	UL		INDISENTSE LF	Towner Strip	100.0	Centene	
01295	Centene Corporation	00000	. 20-4980875				Bridgeway Health Solutions, LLC.	DE	NIA	CenCorp Health Solutions, Inc	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	20-4980818				Bridgeway Health Solutions of	AZ	NIA	Bridgeway Health Solutions,	Ownership	100.0	Centene Corporation	
01233	Contene corporation	00000	.120-4300010	-			ATTZOTIA TITO			. LLO	Owner Sirip	100.0	Centene	
01295	Centene Corporation	00000	. 06 - 1476380				Nurtur Health, Inc	DE	NIA	CenCorp Health Solutions, Inc	Ownership	100.0	Corporation	0
							Family Care & Workforce Diversity Consultants LLC d/b/a						Centene	
01295	Centene Corporation	00000	. 06 - 1404277				Worklife Innovations	CT	NIA	Nurtur Health, Inc	Ownership	100.0	Corporation	0
										Family Care & Workforce	·			
01295	Centene Corporation	00000	16-1686991				Wellness By Choice, LLC	NY	NIA	Diversity Consultants LLC d/b/a Worklife Innovations	Ownership	100 0	Centene Corporation	
	· ·						Cenpatico Behavioral Health,				j '		Centene	
01295	Centene Corporation	00000	. 68-0461584				LLC	CA	NIA	CenCorp Health Solutions, Inc	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	86-0782736				CBHSP Arizona, Inc	AZ	NIA	Cenpatico Behavioral Health,	Ownership	100.0	Centene Corporation	
							,			Cenpatico Behavioral Health,			Centene	
01295	Centene Corporation	00000	47 - 2595704				Cenpatico of California, Inc Integrated Mental Health Mgmt,	CA	NIA	LLC Cenpatico Behavioral Health.	Ownership	100.0	Corporation Centene	. 0
01295	Centene Corporation	00000	74-2892993				LLC	TX	NIA	LLC	Ownership	100.0	Corporation	0
0.4005	· ·		7, 2725,40,4				Integrated Mental Health	,		Integrated Mental Health	ļ'		Centene	
01295	Centene Corporation	00000	74-2785494				Services Cenpatico Behavioral Health of	TX	NIA	Mgmt, LLC Cenpatico Behavioral Health,	Ownership	100.0	Corporation Centene	.[0
01295	Centene Corporation	00000	20-1624120				Arizona, LLC	AZ	NIA	LLC'	Ownership	100.0	Corporation	0
04005	Contant Constant in	14704	80-0879942				Connection of Animone Inc		1.4	Cenpatico Behavioral Health	O	00.0	Centene	
01295	Centene Corporation	14704	. 80-0879942				Cenpatico of Arizona Inc	AZ		of Arizona, LLC	Ownership	U. Ud	Corporation Centene	
01295	Centene Corporation	00000	20-4730341				Envolve Benefit Options, Inc	DE	NIA	CenCorp Health Solutions, Inc	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	36-4520004				Envolve Captive Insurance Company. Inc.	SC	NIA	Envolve Benefit Options, Inc.	Ownership	100.0	Centene Corporation	
01230	Toentene corporation						AECC Total Vision Health Plan	J		·		100.0	Centene	[
01295	Centene Corporation	95302	. 75-2592153				of Texas, Inc	TX		Envolve Benefit Options, Inc.	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	20-4773088				Envolve Vision. Inc.	DE	NIA	Envolve Benefit Options, Inc.	Ownership	100.0	Centene Corporation	
01233	Centene corporation			-				∪∟		Linvorve benefit options, Inc.	. Omiigi Siiip	100.0	Centene	
01295	Centene Corporation	00000	65-0094759	.			Envolve Vision of Florida, Inc	FL	NIA	Envolve Benefit Options, Inc.	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	20-4861241				Envolve Total Vision, Inc	DE	NIA	Envolve Benefit Options, Inc.	Ownership	100 0	Centene Corporation	0
0 1200	pointono ourporation	. 00000	. 20 7001271			·····	penivorvo local ribion, inc			1 Envoive Denetit options, Inc.	v "1101 3111 p	1	001 por at 1011	

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						Securities					(Ownership,			
						Exchange if					Board,	If Control is	Ultimate	1
0		NAIC	I	Filtrat		Publicly	Name of	D	Relationship to	Discoult Constantially	Management,	Ownership	Controlling	1
Group Code	Group Name	Company Code	ID Number	Federal RSSD	CIK	Traded (U.S. or International)	Parent Subsidiaries or Affiliates	Domiciliary Location	Reporting Entity	Directly Controlled by (Name of Entity/Person)	Attorney-in-Fact, Influence, Other)	Provide Percentage	Entity(ies)/ Person(s)	*
0000	Group Hume	0000	ramber	TROOP	Ont	international)	Envolve Vision of New York,	Location	Littly	(Name of Emily) (Section)	milderice, etrici)	1 croomage	Centene	
01295	Centene Corporation	00000	06 - 1635519				Inc	NY	NIA	Envolve Benefit Options, Inc.	Ownership	100.0	Corporation	0
0.4005			40.070004					5-					Centene	1 .
01295	Centene Corporation	00000	46 - 2783884	-			Dental Health & Wellness, Inc	DE	NIA	CenCorp Health Solutions, Inc	. Ownership	100.0	Corporation Centene	
01295	Centene Corporation	15357	45-2303998				Cenpatico of Louisiana, Inc	LA	IA	CenCorp Health Solutions, Inc	Ownership	100 0	Corporation	0
0.200	'						<b>'</b>						Centene	
01295	Centene Corporation	00000	36-2979209	.			Celtic Group, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	0
01295	Centene Corporation	80799	06-0641618				Celtic Insurance Company	11	IA	Celtic Group, Inc.	Ownership	100.0	Centene Corporation	
01200	dentene corporation	007 33	100-0041010	-			derive matrance company			1 de l'ele dioup, me	. Owner Sirip		Centene	
01295	Centene Corporation	15762	35-2525384				Ambetter of Magnolia Inc	MS	IA	Celtic Insurance Company	Ownership	100.0	Corporation	0
04205	Contana Corneration	15700	36-4802632				Ambattar of Dasab State Inc	GA	1.4	Coltio Inquirona Company	Ownership	100.0	Centene	
01295	Centene Corporation	15729	30-4802032				Ambetter of Peach State Inc	GA		Celtic Insurance Company	Ownership	100.0	Corporation Centene	
01295	Centene Corporation	00000	27 - 2221367				Novasys Health, Inc	DE	NIA	Celtic Group, Inc	Ownership	100.0	Corporation	0
	,		l <b>.</b>				CeltiCare Health Plan Holdings				l		Centene	1 .1
01295	Centene Corporation	00000	26-4278205				ColtiCare Health Dien of	DE	NIA	Celtic Group, Inc.	Ownership	100.0	Corporation	
01295	Centene Corporation	13632	26-4818440				CeltiCare Health Plan of Massachusetts, Inc.	MA	IA	CeltiCare Health Plan Holdings LLC	Ownership	100.0	Centene Corporation	
0 1200	00110110 001 por ac roil						I macadinacot to, mo			1			Centene	
01295	Centene Corporation	00000	77 - 0578529				US Script, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	76-0511700				LBB Industries, Inc	ТХ	NIA	US Script, Inc	Ownership	100.0	Centene Corporation	
01295	Centene Corporation	100000	70-0311700	-			LDD IIIdusti ies, iiid	A		1 05 361 1pt , 1116	Owner Sirip	100.0	Centene	
01295	Centene Corporation	00000	75-2612875				RX Direct, Inc	TX	NIA	US Script, Inc	Ownership	100.0	Corporation	0
04005	Contant Comment in	00000	46-2307356				LIC Control IDA LLC	NY	NII A	IIC Conint Inc	O	100.0	Centene	
01295	Centene Corporation	00000	40-230/300				US Script IPA, LLC		NIA	US Script, Inc	Ownership	100.0	Corporation Centene	
01295	Centene Corporation	00000	90-0636938				Casenet LLC.	DE	NIA	Centene Corporation		100.0	Corporation	0
0.4005								CZE				400.0	Centene	
01295	Centene Corporation	00000		-			Casenet S.R.O.		NIA	Casenet LLC	Ownership	100.0	Corporation Centene	
01295	Centene Corporation	00000	61 - 1450727				Centurion Group, Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	0
										]			Centene	
01295	Centene Corporation	00000	90-0766502				Centurion LLC	DE	NIA	Centurion Group, Inc	.Ownership	51.0	Corporation	
01295	Centene Corporation	00000	47 - 1577742				Centurion of Virginia, LLC	VA	NIA	Centurion LLC	Ownership	100 0	Centene Corporation	
	'										· '		Centene	
01295	Centene Corporation	00000	47 - 1686283				Centurion of Vermont, LLC	VT	NIA	Centurion LLC	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	47 - 2967381				Centurion of Mississippi, LLC	MS	N I A	Centurion LLC	Ownership	100.0	Centene Corporation	
U 12JJ	ourtene our por at ron		71 -2301301				Journal of mississippi, LLG		NTA	. 0011(0111011 LL0	. O MITO I STITP	100.0	Centene	
01295	Centene Corporation	00000	30-0752651				Centurion of Tennessee, LLC	TN	NIA	Centurion LLC	Ownership	100.0	Corporation	0
04205	Contono Cornoretica	00000	61 1606004				Massachusetts Partnership for	NA A	NII A	Conturion IIC	Ownersh:-	400.0	Centene	
01295	Centene Corporation	00000	61 - 1696004				Correctional Healthcare, LLC	MA	NIA	Centurion LLC	Ownership	100.0	Corporation Centene	[
01295	Centene Corporation	00000	46-3590120				Centurion of Idaho, LLC	ID	NIA	Centurion LLC	Ownership	100.0	Corporation	0

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1	2	3	4	5	6	Name of	8	9	10	11	12 Type of Control	13	14	15
						Securities					(Ownership,	15 0 - 1 - 1 -	1.00	
		NAIC				Exchange if Publicly	Name of		Relationship to		Board, Management,	If Control is Ownership	Ultimate Controlling	
Group		Company	ID	Federal		Traded (U.S. or	Parent Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Entity(ies)/	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Person(s)	*
01295	Centene Corporation	00000	46 - 1041008				Centurion of Michigan, LLC	MI	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	0
0.4005			40.0747044									400.0	Centene	
01295	Centene Corporation	00000	46-2717814	-			Centurion of Minnesota, LLC Centurion Correctional	MN	NIA	Centurion LLC	Ownership	100.0	Corporation Centene	
01295	Centene Corporation	00000	81-1161492				Healthcare of New Mexico, LLC	NM	NIA	Centurion LLC	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	81-0687470				Centurion of Florida, LLC	FI	NIA	Centurion LLC	Ownership.	100.0	Centene Corporation	
01295	'	00000					Specialty Therapeutic Care		NTA	. Gontanion ELG	Ownership	100.0	Centene	
01295	Centene Corporation	00000	27 - 3617766				Holdings, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	73-1698808				  Specialty Therapeutic Care, LP	ТХ	NIA	Specialty Therapeutic Care	Ownership	100 0	Centene Corporation	
	·						Specialty Therapeutic Care, GP,			Specialty Therapeutic Care	· '		Centene	
01295	Centene Corporation	00000	73-1698807	-			LLC	TX	NIA	Holdings, LLCSpecialty Therapeutic Care,	Ownership	100.0	Corporation Centene	
01295	Centene Corporation	00000	73-1698808				Specialty Therapeutic Care, LP	ТХ	NIA	GP, LLC	Ownership	0.0	Corporation	0
01295	Centene Corporation	00000	26-2624521				Specialty Therapeutic Care West, LLC	TX	NIA	Specialty Therapeutic Care,	Ownership.	100.0	Centene Corporation	
01295	·	00000	20-2024321	-			West, LLG	A		Specialty Therapeutic Care,	Townership	100.0	Centene	
01295	Centene Corporation	00000	80-0856383				AcariaHealth Solutions, Inc	DE	NIA	J LP	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	45-2780334				AcariaHealth, Inc	DE	NIA	Specialty Therapeutic Care,	Ownership	100 0	Centene Corporation	
	·						, '				i '		Centene	
01295	Centene Corporation	00000	27 - 1599047				AcariaHealth Pharmacy #14, Inc	CA	NIA	AcariaHealth, Inc	Ownership	100.0	Corporation Centene	[
01295	Centene Corporation	00000	20-8192615				AcariaHealth Pharmacy #11, Inc	TX	NIA	AcariaHealth, Inc	Ownership	100.0	Corporation	0
04005	C	00000	07 0705404				Association the Pharmany #42	NIV/	NII A	Association the last	O	400.0	Centene	
01295	Centene Corporation	00000	27 - 2765424				AcariaHealth Pharmacy #12, Inc	NY	NIA	AcariaHealth, Inc	Ownership	100.0	Corporation Centene	
01295	Centene Corporation	00000	26-0226900				AcariaHealth Pharmacy #13, Inc	CA	NIA	AcariaHealth, Inc	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	13-4262384				AcariaHealth Pharmacy, Inc	CA	NIA	AcariaHealth. Inc.	Ownership	100.0	Centene Corporation	
	,						,,			]			Centene	
01295	Centene Corporation	00000	27 - 3707698				HomeScripts.com, LLC	MI	NIA	AcariaHealth, Inc	Ownership	100.0	Corporation Centene	
01295	Centene Corporation	00000	20-8235695				New York Rx, Inc	NY	NIA	AcariaHealth, Inc	.Ownership	100.0	Corporation	
04005		00000	27 - 0275614				U.S. Medical Management	DE	NII A	Contant Consenting	O	400.0	Centene	
01295	Centene Corporation	00000	. 27 -027 50 14				Holdings, Inc	 	NIA	Centene CorporationU.S. Medical Management	Ownership	100.0	Corporation Centene	[
01295	Centene Corporation	00000	38-3153946				U.S. Medical Management, LLC	DE	NIA	Holdings, Inc	Ownership	20.0	Corporation	0
01295	Centene Corporation	00000	38-3153946				U.S. Medical Management, LLC	DE	NIA	Centene Corporation	.Ownership	48 0	Centene Corporation	
	'									'			Centene	
01295	Centene Corporation	00000	31-1733889	-			RMED, LLC	FL	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation Centene	0
01295	Centene Corporation	00000	47 - 2138680	<u> </u>			IAH of Florida, LLC	FL	NIA	RMED, LLC	Ownership	100.0	Corporation	0
04005							Hanitana Hama Hannina 110	M.	NII A	III C. Madical Management 110	, ,		Centene	
01295	Centene Corporation	00000	51-0581762	.			Heritage Home Hospice, LLC	MI	NIA	U.S. Medical Management, LLC	.i∪wnersnip	1	Corporation	10

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1	2	3	4	5	6	7 Name of	8	9	10		11	12 Type of Control	13	14	15
						Securities						(Ownership,			
		NAIG				Exchange if	Name		Dalatianahin ta			Board,	If Control is	Ultimate	
Group		NAIC Company	l ID	Federal		Publicly Traded (U.S. or	Name of Parent Subsidiaries	Domiciliary	Relationship to Reporting	Directly	Controlled by	Management, Attorney-in-Fact,	Ownership Provide	Controlling Entity(ies)/	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity		f Entity/Person)	Influence, Other)	Percentage	Person(s)	*
01295	Centene Corporation	00000	20-2827613				Grace Hospice of Austin, LLC	MI	NIA	II C Modical	Management, LLO	Ownership	100.0	Centene Corporation	
01293	Centene Corporation	00000	20-202/013				I diace nospice of Austin, LLC	WI I	NIA	U.S. MEUICAI	management, LLC	Owner Sirip	100.0	Centene	
01295	Centene Corporation	00000	20 - 1530070				ComfortBrook Hospice, LLC	OH	NIA	U.S. Medical	Management, LLO	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	20-4996551				Comfort Hospice of Texas, LLC	MI	N I A	IIS Medical	Management, LLO	Ownershin	100.0	Centene Corporation	
	'						Grace Hospice of San Antonio,					'		Centene	
01295	Centene Corporation	00000	20-2827526				Crace Hospice of Grand Rapids,	MI	NIA	U.S. Medical	Management, LL(	Ownership	100.0	Corporation Centene	0
01295	Centene Corporation	00000	45-0679248				LLC	MI	NIA	U.S. Medical	Management, LLO	Ownership.	100.0	Corporation	0
0.4005	·	00000	45,000,4005							0 11 11			400.0	Centene	
01295	Centene Corporation	00000	45-0634905				Grace Hospice of Indiana, LLC	MI	NIA	U.S. Medical	Management, LLO	Ownersnip	100.0	Corporation Centene	0
01295	Centene Corporation	00000	45-5080637				Grace Hospice of Virginia, LLC	MI	NIA	U.S. Medical	Management, LLO	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	45 - 5080567				Comfort Hospice of Missouri,	MI	NIA	II S Madical	Management, LLO	Ownerchin	100 0	Centene Corporation	
	·													Centene	
01295	Centene Corporation	00000	45-5080675				Grace Hospice of Colorado, LLC	MI	NIA	U.S. Medical	Management, LLO	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	46 - 1708834				Grace Hospice of Wisconsin, LLC.	MI	NIA	U.S. Medical	Management, LLO	Ownership	100.0	Centene Corporation	0
	·						' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '				0 ,	i '		Centene	
01295	Centene Corporation	00000	26 - 4435532				Seniorcorps Pensinsula, LLC	VA	NIA	U.S. Medical	Management, LLO	Ownership	100.0	Corporation Centene	0
01295	Centene Corporation	00000	33-1179031				R&C Healthcare, LLC	TX	NIA	U.S. Medical	Management, LLO	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	20-0927034				A N J, LLC	TX	NIA	II S Modical	Management, LLO	Ownorchin	100.0	Centene Corporation	
01293	Centene corporation		20-092/034				Pinnacle Senior Care of	A	NTA					Centene	
01295	Centene Corporation	00000	46-0861469				Missouri, LLC	MI	NIA	U.S. Medical	Management, LLO	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	03-0556422				Country Style Health Care, LLC	ТХ	NIA	U.S. Medical	Management, LL(	Ownership.	100.0	Centene Corporation	0
	·										•	,		Centene	
01295	Centene Corporation	00000	14-1878333				Phoenix Home Health Care, LLC Traditional Home Health	DE	NIA	U.S. Medical	Management, LL(	Ownership	100.0	Corporation Centene	0
01295	Centene Corporation	00000	75 - 2635025				Services, LLC	ТХ	NIA	U.S. Medical	Management, LLO	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	38-2751108				Family Nurse Care, LLC	MI	NIA	II C Modical	Management, LL(	Ownership	100.0	Centene Corporation	
01293	Centene Corporation						rainity Nurse care, LLC		NTA	U.S. MEUICAI	management, LLC	Owner strip	100.0	Centene	
01295	Centene Corporation	00000	20-5108540				Family Nurse Care II, LLC	MI	NIA	U.S. Medical	Management, LLO	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	20-3920947				Family Nurse Care of Ohio, LLC	MI	NIA.	U.S. Medical	Management, LL(	Ownership	100 0	Centene Corporation	
	'						Pinnacle Senior Care of					· ·		Centene	
01295	Centene Corporation	00000	46-4229858				Wisconsin, LLCPinnacle Senior Care of	WI	NIA	U.S. Medical	Management, LL(	Ownership	100.0	Corporation Centene	0
01295	Centene Corporation	00000	81 - 1565426				Indiana, LLC	MI	NIA	U.S. Medical	Management, LL(	Ownership	100.0	Corporation	0
01205	Contono Cornoration	00000	76-0713516				Dinnaala Homa Cora IIC		N I A					Centene	
01295	Centene Corporation	00000	10-01 10010				Pinnacle Home Care, LLC North Florida Health Services.	TX	NIA		Management, LL(	i '	100.0	Corporation Centene	U
01295	Centene Corporation	00000	59-3519060	<u> </u>			Inc	FL	NIA	U.S. Medical	Management, LLO	Ownership	100.0	Corporation	0

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1	2	3	4	5	6	7 Name of Securities Exchange if	8	9	10	11	12 Type of Control (Ownership, Board,	13 If Control is	14 Ultimate	15
Group		NAIC Company	ID	Federal		Publicly Traded (U.S. or	Name of Parent Subsidiaries	Domiciliary	Relationship to Reporting	Directly Controlled by	Management, Attornev-in-Fact.	Ownership Provide	Controlling Entity(ies)/	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Person(s)	*
04005	Contain Consortion	00000	47 - 1742728				Pinnacle Sr. Care of Kalamazoo,	MI	NILA	II C. Madical Managament, II C.	Owen and in	400.0	Centene	
01295	Centene Corporation	. 00000	147 - 1742728	-			LLC.	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation Centene	0
01295	Centene Corporation	. 00000	46 - 1734288				Hospice DME Company, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	20-4364776				Rapid Respiratory Services, LLC.	DE	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	0
01295	Centene Corporation	. 00000					USMM Accountable Care Network,			0.5. Medicai Management, LLC	ownersinp	100.0	Centene	
01295	Centene Corporation	. 00000	46-5730959				LLC.	DE	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation	0
01295	Centene Corporation	00000	46-5735993				USMM Accountable Care Partners,	DE	NIA	U.S. Medical Management, LLC.	Ownershin	100.0	Centene Corporation	
01200	Toontone corporation						USMM Accountable Care			9	,		Centene	
01295	Centene Corporation	. 00000	46 - 5745748	-			Solutions, LLC	DE	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation	0
01295	Centene Corporation	. 00000	45-4165480				USMM ACO. LLC.	l MI	NIA	U.S. Medical Management, LLC.	Ownership	100.0	Centene Corporation	
İ	'						,			•	·		Centene	
01295	Centene Corporation	. 00000	45-4157180	-			USMM ACO Florida, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation Centene	0
01295	Centene Corporation	. 00000	45-4154905				USMM ACO North Texas, LLC	MI	NIA	U.S. Medical Management, LLC.	Ownership	100.0	Corporation	0
04005	0	00000	47 5000070				Harlah Mada Jan	DE	NI A	0	0	400.0	Centene	
01295	Centene Corporation	. 00000	47 - 5208076				Health Net, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Corporation Centene	0
01295	Centene Corporation	. 00000	95-4402957				Health Net of California, Inc	CA	NIA	Health Net, Inc	Ownership	100.0	Corporation	0
01295	Centene Corporation	66141	73-0654885				Health Net Life Insurance Company	CA	I A	Health Net of California, Inc.	Ownership	100.0	Centene Corporation	
01233	Centene corporation	. 00141					Health Net Life Reinsurance			Health Net of California,	. Owner strip	100.0	Centene	
01295	Centene Corporation	. 00000	98-0409907				Company	CYM	NIA	Inc.	Ownership	100.0	Corporation	
01295	Centene Corporation	. 00000	54-2174069				Health Net of California Real Estate Holdings, Inc	CA	NIA	Health Net of California, Inc.	Ownership	100.0	Centene Corporation	
İ	'										·		Centene	
01295	Centene Corporation	. 00000	95-4117722				Managed Health Network, Inc Catalina Behavioral Health	DE	NIA	Health Net, Inc	Ownership	100.0	Corporation Centene	
01295	Centene Corporation	00000	51-0490598	]]			Services, Inc.	AZ	NIA	Managed Health Network, Inc	Ownership	100.0	Corporation	
0.4005		00000	05 0047000				<u>.</u>					400.0	Centene	
01295	Centene Corporation	. 00000	95-3817988	-			Managed Health Network	CA	NIA	Managed Health Network, Inc	Ownership	100.0	Corporation Centene	-
01295	Centene Corporation	. 00000	95-4146179				MHN Services	CA	NIA	Managed Health Network, Inc	Ownership	100.0	Corporation	
01295	Centene Corporation	00000	13-4027559				MHN Services IPA. Inc.	NY	NIA	MHN Services	Ownership	100.0	Centene Corporation	
01293	Centene corporation	. 00000	. 13-402/339				I WILL SELVICES IFA, IIIC.		NTA	WILLIA DELATORS	Owner Strip	100.0	Centene	
01295	Centene Corporation	. 00000	42-1680916				MHN Government Services, Inc	DE	NIA	MHN Services.	Ownership	100.0	Corporation	
01295	Centene Corporation	00000	51-0589404				MHN Global Services, Inc	DE	NIA	MHN Government Services, Inc.	Ownershin	100.0	Centene Corporation	
	'			1			MHN Government Services-						Centene	
01295	Centene Corporation	. 00000	80-0852000	-[			Belgium, Inc MHN Government Services-	DE	NIA	MHN Government Services, Inc.	Ownership	100.0	Corporation	
01295	Centene Corporation	. 00000	90-0889816	]			Diibouti. Inc.	DE	NIA.	MHN Government Services, Inc.	Ownership	100.0	Centene Corporation	
	'						MHN Government Services-			,	i '		Centene	
01295	Centene Corporation	. 00000	80-0852008				Germany, Inc	DE	NIA	MHN Government Services, Inc.	Ownership	100.0	Corporation	

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1	2	3	4	5	6	7 Name of	8	9	10	11	12 Type of Control	13	14	15
						Securities					(Ownership,			
						Exchange if					Board,	If Control is	Ultimate	
		NAIC				Publicly	Name of		Relationship to		Management,	Ownership	Controlling	
Group		Company	ID	Federal		Traded (U.S. or	Parent Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Entity(ies)/	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Person(s)	*
01295	Centene Corporation	00000	90-0889803				MHN Government Services-Guam,	DE	NIA	MHN Government Services, Inc.	Ownership	100.0	Centene Corporation	
01295	Centene Corporation	. 000000					MHN Government Services-	∪⊑	INTA	I MINI GOVERNMENT SERVICES, THC.	ownership	100.0	Centene	
01295	Centene Corporation	00000	90-0889825				International, Inc.	DE	NIA	MHN Government Services, Inc.	Ownership	100.0	Corporation	
0.200	00110110 001 por at 1011		00 0000020				MHN Government Services-Italy,						Centene	
01295	Centene Corporation	. 00000	80-0852019				Inc	DE	NIA	MHN Government Services, Inc.	Ownership	100.0	Corporation	
		1	<b>.</b>				MHN Government Services-Japan,			l			Centene	
01295	Centene Corporation	. 00000	46 - 1038058	-			IncMHN Government Services-Puerto	DE	NIA	MHN Government Services, Inc.	Ownership	100.0	Corporation	
01295	Centene Corporation	00000	90-0889815				Rico. Inc.	DE	NIA	MHN Government Services, Inc.	Ownerchin	100.0	Centene Corporation	
01233	Centene corporation						MHN Government Services-Turkey,	DL		I willing dovernment services, inc.	Owner 3111P	100.0	Centene	
01295	Centene Corporation	. 00000	90-0889824				Inc	DE	NIA	MHN Government Services, Inc.	Ownership	100.0	Corporation	l
							MHN Government Services-United			· · · · · · · · · · · · · · · · · · ·	i '		Centene	
01295	Centene Corporation	. 00000	90-0889833				Kingdom, Inc	DE	NIA	MHN Government Services, Inc.	Ownership	100.0	Corporation	
04005	0	00000	00 0057005				Natural Brasiliana III	DE.	ALL A	MUNICOLOUR CONTRACTOR	0	40.0	Centene	
01295	Centene Corporation	. 00000	88 - 0357895				Network Providers, LLC Health Net Federal Services.	DE	NIA	MHN Government Services, Inc.	Ownership	10.0	Corporation Centene	
01295	Centene Corporation	. 00000	68-0214809				IIIC	DE	NIA	Health Net, Inc.	Ownership	100.0	Corporation	
01200	dentene derperation	100000		1			Health Net Preferred Providers.			Health Net Federal Services.	0 #1101 0111 p		Centene	
01295	Centene Corporation	. 00000	61 - 1388903				LLC	DE	NIA	LLC	Ownership	100.0	Corporation	
										Health Net Federal Services,	,		Centene	
01295	Centene Corporation	. 00000	35-2490375				Health Net Veterans, LLC	DE	NIA	LLC	Ownership	100.0	Corporation	
01295	Contona Corporation	00000	88-0357895				Network Providers, LLC	DE	NIA	Health Net, Inc.	Ownership	00.0	Centene Corporation	
01295	Centene Corporation	. 000000					Health Net of the Northeast.		INTA	l learth Net, mc	Ownership	90.0	Centene	
01295	Centene Corporation	00000	06-1116976				LLC	DE	NIA	Network Providers, LLC	Ownership	25.0	Corporation	
							Health Net of the Northeast,						Centene	
01295	Centene Corporation	. 00000	06 - 1116976				LLC	DE	NIA	Health Net, Inc	Ownership	75.0	Corporation	
0.4005		00000	04 4475400					55		L N		400.0	Centene	
01295	Centene Corporation	. 00000	84-1175468				QualMed, Inc QualMed Plans for Health of	DE	NIA	Health Net, Inc	Ownership	100.0	Corporation Centene	
01295	Centene Corporation	00000	84-0975985				Colorado. Inc.	CO CO	NIA	QualMed. Inc.	Ownership	100.0	Corporation	
01200	deriverse der per de ren	100000	01 007 0000				Health Net Health Plan of			addriilod ( 1110 :	0 11101 0111 p		Centene	
01295	Centene Corporation	95800	93 - 1004034				Oregon, Inc	0R	IA	QualMed, Inc	Ownership	100.0	Corporation	
							HSI Advantage Health Holdings,						Centene	
01295	Centene Corporation	. 00000	23-2867299				Inc	DE	NIA	Health Net, Inc	Ownership	100.0	Corporation	
01295	Centene Corporation	00000	23-2867300				QualMed Plans for Health of Western Pennsylvania, Inc	PA	NIA	HSI Advantage Health Holdings, Inc.	Ownership	100.0	Centene Corporation	
01230	l centene corporation			1			Pennsylvania Health Care Plan.	r.	IN I A	HSI Advantage Health	10411619111h	100.0	Centene	
01295	Centene Corporation	00000	25-1516632	<u>                                     </u>		]	Inc.	PA	NIA	Holdings, Inc	Ownership	100.0	Corporation	<u> </u>
	,												Centene	
01295	Centene Corporation	. 00000	94-3037822				Health Net Services Inc	DE	NIA	Health Net, Inc	Ownership	100.0	Corporation	
04005	Contant Consentition	15005	04 4040000				Health Net Community Solutions	, 7	1.4	Haalah Nat Ja:	Owen a mala i	400.0	Centene	
01295	Centene Corporation	. 15895	81 - 1348826	·			of Arizona, Inc Health Net Community Solutions,	AZ	IA	Health Net, Inc	Ownership		Corporation	
01295	Centene Corporation	. 00000	54-2174068				The	CA	NIA	Health Net, Inc.	Ownership	100 0	Centene Corporation	
0 1200	derivers our per at ron						1110			110011111011111111111111111111111111111		1	Centene	
01295	Centene Corporation	95206	36-3097810				Health Net of Arizona, Inc	AZ	I A.	Health Net, Inc	Ownership	100.0	Corporation	

1	2	3 NAIC	4	5	6	7 Name of Securities Exchange if Publicly	8 Name of	9	10 Relationship to	11	Type of Control (Ownership, Board, Management,	13 If Control is Ownership	14 Ultimate Controlling	15
Group Code	Group Name	Company Code	ID Number	Federal RSSD	CIK	Traded (U.S. or International)	Parent Subsidiaries or Affiliates	Domiciliary Location	Reporting Entity	Directly Controlled by (Name of Entity/Person)	Attorney-in-Fact, Influence, Other)	Provide Percentage	Entity(ies)/ Person(s)	*
01295	Centene Corporation	00000	54-2153100				Health Net One Payment Services, Inc	DE	NIA	Health Net, Inc	Ownership	100.0	Centene Corporation	
01295	Centene Corporation	00000					Health Net of Pennsylvania, LLC.	PA	NIA	Health Net, Inc	Ownership	100.0	Centene Corporation	
01295	Centene Corporation	00000	23-2456130				QualMed Plans for Health of Pennsylvania, Inc	PA	NIA	Health Net, Inc	Ownership	100.0	Centene Corporation	
01295	Centene Corporation	00000	68-0390434				FH Surgery Limited, Inc	CA	NIA	Health Net, Inc	Ownership	100.0	Centene Corporation	
01295	Centene Corporation	00000	68-0390438	-			Foundation Health Facilities,	CA	NIA	Health Net, Inc	Ownership	100.0	Centene Corporation	
01295	Centene Corporation	00000	98-0150604				FH Assurance Company	CYM	NIA	Health Net, Inc	Ownership	100.0	Centene Corporation	
01295	Centene Corporation	00000	68-0295375				Health Net Pharmaceutical Services	CA	NIA	Health Net, Inc	Ownership	100.0	Centene Corporation	
01295	Centene Corporation	00000	86-0660443				Health Net of Arizona Administrative Services, Inc	AZ	NIA	Health Net, Inc	Ownership	100.0	Centene Corporation	
01295	Centene Corporation	00000	84 - 1301249				National Pharmacy Services Inc	DE	NIA	Health Net, Inc	Ownership	100.0	Centene Corporation	
01295	Centene Corporation	00000	23-2789453				Integrated Pharmacy Systems, Inc	PA	NIA	National Pharmacy Services	Ownership	90.0	Centene Corporation	
01295	Centene Corporation	00000	68-0390435				FH Surgery Centers Inc	CA	NIA	Health Net, Inc	Ownership	100.0	Centene Corporation	
01295	Centene Corporation	00000	68-0343818				Greater Sacramento Surgery Center LP	CA	NIA	FH Surgery Centers Inc	Ownership	70.8	Centene Corporation	
01295	Centene Corporation	00000	46-2616037				Health Net Access, Inc.	AZ	NIA	Health Net, Inc	Ownership	100.0	Centene Corporation	
01295	Centene Corporation	00000	20-8630006				MHS Consulting, International, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	
01295	Centene Corporation	00000					PRIMEROSALUD, S.L.	ESP	NIA	MHS Consulting, International, Inc	Ownership	100.0	Centene Corporation	
01295	Centene Corporation	00000					Centene UK Limited	GBR	NIA	MHS Consulting, International, Inc	Ownership	100.0	Centene Corporation	
01295	Centene Corporation	00000					The Practice Plc	GBR	NIA	MHS Consulting, International, Inc.	Ownership	100.0	Centene Corporation	

Asterisk	Explanation

### SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

	RESPONSE
1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
Explanation:	
1.	
Bar Code:	
1.	

### **OVERFLOW PAGE FOR WRITE-INS**

### **SCHEDULE A – VERIFICATION**

Real Estate		
	1	2
	Year To Date	Prior Year Ended December 31
Book/adjusted carrying value, December 31 of prior year	0	L0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition 2.2 Additional investment made after acquisition 3. Current year change in encumbrances		L0
2.2 Additional investment made after acquisition		0
3. Current year change in encumbrances		0
4. Total gain (loss) on disposals		0
5. Deduct amounts received on disposals		0
Total foreign exchange change in book/adjusted carrying value		
7. Deduct current year's other-than-temporary impairment recognized		L0
Deduct current year's depreciation		L0
Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)	0	0
10. Deduct total nonadmitted amounts	0	L0
11. Statement value at end of current period (Line 9 minus Line 10)	0	0

### **SCHEDULE B - VERIFICATION**

Mortgage Loans		
	1	2
		Prior Year Ended
	Year To Date	December 31
Book value/recorded investment excluding accrued interest, December 31 of prior year	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		0
2.2 Additional investment made after acquisition		0
Capitalized deferred interest and other.		0
4. Accrual of discount		0
3. Capitalized deferred interest and other.  4. Accrual of discount.  5. Unrealized valuation increase (decrease).  6. Total gain (loss) on disposals.  7. Deduct amounts received on disposals.		0
6. Total gain (loss) on disposals		0
Deduct amortization of premium and mortgage interest points and commitment fees      Total foreign exchange change in book value/recorded investment excluding accrued interest.		0
<ol><li>Total foreign exchange change in book value/recorded investment excluding accrued interest.</li></ol>		0
10. Deduct current year's other-than-temporary impairment recognized		0
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2	2+3+4+5+6-7-	
8+9-10)	0	0
12. Total valuation allowance		0
13. Subtotal (Line 11 plus Line 12)	0	0
14. Deduct total nonadmitted amounts	0	0
15. Statement value at end of current period (Line 13 minus Line 14)	0	0

## **SCHEDULE BA – VERIFICATION**

Other Long-Term Invested Assets		
-	1	2
		Prior Year Ended
	Year To Date	December 31
Book/adjusted carrying value, December 31 of prior year	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		0
2.2 Additional investment made after acquisition     3. Capitalized deferred interest and other		
Capitalized deferred interest and other.		L0
4. Accrual of discount.		L0
5. Unrealized valuation increase (decrease)		L0
6. Total gain (loss) on disposals.		L0
Total gain (loss) on disposals.      Deduct amounts received on disposals.      Deduct amortization of premium and depreciation.		<u></u> 0
Deduct amortization of premium and depreciation		L0
Total foreign exchange change in book/adjusted carrying value		L0
10. Deduct current year's other-than-temporary impairment recognized		L0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	L0	L0
12. Deduct total nonadmitted amounts.	0	L0
13 Statement value at end of current period (Line 11 minus Line 12)	0	0

### **SCHEDULE D - VERIFICATION**

Bonds and Stocks		
	1	2
		Prior Year Ended
	Year To Date	December 31
Book/adjusted carrying value of bonds and stocks, December 31 of prior year	1,097,419	524,169
Cost of bonds and stocks acquired	0	1,096,820
3. Accrual of discount		599
Unrealized valuation increase (decrease)		0
5. Total gain (loss) on disposals		L0
Deduct consideration for bonds and stocks disposed of		L524,000
7. Deduct amortization of premium		169
8. Total foreign exchange change in book/adjusted carrying value.  9. Deduct current year's other-than-temporary impairment recognized.  10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).		0
Deduct current year's other-than-temporary impairment recognized		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)		1,097,419
11. Deduct total nonadmitted amounts		L0
12. Statement value at end of current period (Line 10 minus Line 11)	1,097,690	1,097,419

### **SCHEDULE D - PART 1B**

Showing the Acquisitions, Dispositions and Non-Trading Activity

During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

	1 Book/Adjusted Carrying Value	2 Acquisitions	arter for all Bonds and Pre 3 Dispositions	4 Non-Trading Activity	5 Book/Adjusted Carrying Value	6 Book/Adjusted Carrying Value	7 Book/Adjusted Carrying Value	8 Book/Adjusted Carrying Value
NAIO Bartaretta	Beginning of	During	During	During	End of	End of	End of	December 31
NAIC Designation	Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
BONDS								
1. NAIC 1 (a)	1,097,420			270	1,097,690	0	0	1,097,420
2. NAIC 2 (a)	0				0	0	0	0
3. NAIC 3 (a)	0				0	0	0	0
4. NAIC 4 (a)	0				0	0	0	0
5. NAIC 5 (a)	0				0	0	0	0
6. NAIC 6 (a)	0				0	0	0	0
7. Total Bonds	1,097,420	0	0	270	1,097,690	0	0	1,097,420
PREFERRED STOCK								
8. NAIC 1	0				0	0	0	0
9. NAIC 2	0				0	0	0	0
10. NAIC 3	0				0	0	0	0
11. NAIC 4	0				0	0	0	0
12. NAIC 5	0				0	0	0	0
13. NAIC 6	0				0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds & Preferred Stock	1,097,420	0	0	270	1,097,690	0	0	1,097,420

(a) Book/Ad	ljusted Carrying Value column for the	e end of the current reporting period i	ncludes the following amount of non-rated short-term and	ash equivalent bonds by NAIC designation:	NAIC 1 \$	; NAIC 2 \$
NAIC 3 \$	; NAIC 4 \$	; NAIC 5 \$	; NAIC 6 \$			

## **SCHEDULE DA - PART 1**

Short-Term Investments

	1	2	3	4	5
					Paid for Accrued
	Book/Adjusted			Interest Collected	Interest
	Carrying Value	Par Value	Actual Cost	Year To Date	Year To Date
9199999		xxx			

### **SCHEDULE DA - VERIFICATION**

Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
Book/adjusted carrying value, December 31 of prior year	0	687 ,894
Cost of short-term investments acquired		0
3. Accrual of discount		883
Unrealized valuation increase (decrease)		0
5. Total gain (loss) on disposals		0
Deduct consideration received on disposals		688,777
7. Deduct amortization of premium		0
Total foreign exchange change in book/adjusted carrying value		0
Deduct current year's other-than-temporary impairment recognized		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)		
11. Deduct total nonadmitted amounts		0
12. Statement value at end of current period (Line 10 minus Line 11)	0	0

# Schedule DB - Part A - Verification NONE

Schedule DB - Part B - Verification NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part C - Section 2

NONE

Schedule DB - Verification NONE

Schedule E - Verification NONE

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

NONE

Schedule B - Part 3

Schedule BA - Part 2

NONE

Schedule BA - Part 3

**NONE** 

Schedule D - Part 3

**NONE** 

Schedule D - Part 4

NONE

Schedule DB - Part A - Section 1

**NONE** 

Schedule DB - Part B - Section 1

**NONE** 

Schedule DB - Part D - Section 1

**NONE** 

Schedule DB - Part D - Section 2

**NONE** 

Schedule DL - Part 1

NONE

Schedule DL - Part 2

NONE

### **SCHEDULE E - PART 1 - CASH**

	Mont	th End Dep	ository Balance	s				
1	2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
Depository	Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	6 First Month	7 Second Month	8	*
Open Depositories	Code	IIIICICSI	Quarter	Date	T II St. IVIOTILIT	Second Month	THII WOHLI	
D 0 D 4000 Ct DI								$\Box$
US Bank		0 .000	0		3,204,671	605 , 102	72,841	XXX
Square 1 Bank		0 . 150	0		650,957	0	53,261	XXX
0199998 Deposits in depositories that do								
not exceed the allowable limit in any one depository	XXX	XXX						XXX
(See Instructions) – Open Depositories  0199999 Total Open Depositories	XXX	XXX	0	0	3,855,629	605,102	126,102	
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0399999 Total Cash on Deposit	XXX	XXX	0	0	3,855,629	605,102	126,102	XXX
049999 Cash in Company's Office	XXX	XXX	XXX	XXX	2 055 000	COF 400	400 400	XXX
0599999 Total	XXX	XXX	0	0	3,855,629	605,102	126,102	XXX

## **SCHEDULE E - PART 2 - CASH EQUIVALENTS**

Show Investments Owned End of Current Quarter									
1	2	3	4	5	6	7	8		
Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest	Amount Received		
Description	Code	Acquired	interest	Date	Carrying value	Due & Accrued	During Year		
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8699999 Total Cash Equivalents					0	0	0		